(Form C-104) Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New-Well Mociencelecies

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Cas must be reported on 15.025 psia at 60° Fahrenheit.

(€	ompany or Op	rator)	s Iles	, \(\) (Lease)	Vell No	, in.	<u> </u>	<u> </u>
(Company or Operator) J 4			, T, R	32 NM	IPM., Malje	mar	***************************************	Poo
UMR L			County. Date Spu					
			Elevation 415					
Please indicate location			Top Oil/Gas Pay					
D	C B	A	PRODUCING INTERVAL	4160-66	41.00-06			
			Perforations 342	6- 30- 394 8 -	•54 39 75- 8	1 4014	-18 403	8-48
E	F G	H	Open Hole		Depth Casing Shoe	4209	Depth Tubing	
			OIL WELL TEST -		_			
ե	K J	I	Natural Prod. Test	: bbls.c	oil, b	bls water in	hrs.	Choke min. Size
		1	Test After Acid or					
M	N O	P	load oil used): 3					
			GAS WELL TEST -					
		<u>l</u>	Natural Prod. Test					
Size Feet Sax			Test After Acid or Choke Size				/Day; Hours	flowed
8 5/8	308	200						
5]. "	4200	450	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and					
2 3/8	3962		sand): 1.000 ga	ls. acid. 30	te first new	efining	<u>011, 60,0</u>	00 # sand
2 3/0	3702		Casing no The Press. Packer					
			Oil Transporter			•		
	-	<u></u>	Gas Transporter					
marks:	***************************************	••••••			***************************************	******		*****************
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