

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

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. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Maljamar, New Mexico 12020-1961
(Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Boller & Nichols, Inc., Well No. 21, in 1/4 1/4 1/4, (Company or Operator) (Lease)

Sec. 9, T. 17, R. 32, NMPM., Maljamar Pool
Unit Letter

Lee County. Date Spudded 11-29-61 Date Drilling Completed 12-8-61

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Elevation 4015 Total Depth 4060 PBTD

Top Oil/Gas Pay 3260 Name of Prod. Form. Grayburg

PRODUCING INTERVAL -

Perforations 3260 to 3390 (3370) - 3390 to 3900 - 3970 to 3990

Open Hole Depth Casing Shoe 4060 Tubing 3375

OIL WELL TEST -

Natural Prod. Test: 74 bbls. oil, none bbls water in 24 hrs, min. Size 16/64

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): bbls. oil, bbls water in hrs, min. Size

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):

Casing Tubing Date first new Press. Packer Press. 100 oil run to tanks 12-20-61

Oil Transporter Continental Pipeline

Gas Transporter

Tubing, Casing and Cementing Record

Size	Feet	Sax
3 5/8	294	200
5 1/2	4060	350
2 3/8	3375	

Remarks: Did not treat this well

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved, 19.

OIL CONSERVATION COMMISSION

By:

Title

Boller & Nichols
(Company or Operator)

By: O. L. McCotter
(Signature)

Title: Supt.

Send Communications regarding well to:

Name: Boller & Nichols

Address: Maljamar, N. Mex