

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 QUADRUPPLICATE 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.

Hobbs, New Mexico  
(Place)

August 29, 1957  
(Date)

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

~~TELEPHONE GAS TRANSMISSION CO.~~ State A.A. Kennitz, Well No. 3, in NE 1/4, NW 1/4,

(Company or Operator)

(Lease)

Unit Letter  
G

Sec. 25

T. -16-S

R. -33-E

NMPM,

Kennitz-Wolfcamp

Pool

Lea

County. Date Spudded June 22, 1957

Date Drilling Completed August 28, 1957

Please indicate location:

Elevation 4157 Total Depth 10,909' PBTD 10,857'

Top Oil/Gas Pay 10,746' Name of Prod. Form. Wolfcamp

PRODUCING INTERVAL -

Perforations 10,818-28', 10,788-808', 10,748-778'.

Open Hole 0 Depth Casing Shoe 10,905' Depth Tubing 10,673'

OIL WELL TEST -

Natural Prod. Test: 257 bbls. oil, 0 bbls water in 24 hrs, - min. Size 2 3/8"

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 Press. 0 Tubing Press. 100 Date first new oil run to tanks August 28, 1957

Oil Transporter Gulf Refining

Gas Transporter

Remarks:

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

Approved: 10-2-57, 1957

TELEPHONE GAS TRANSMISSION COMPANY

(Company or Operator)

By: D. P. Dampf (Signature)

Title: District Production Superintendent

Send Communications regarding well to:

Name: Tennessee Gas Transmission Company

Address: 203 North Linum, Hobbs, New Mexico

OIL CONSERVATION COMMISSION

By: E. J. Fisher

Title: