

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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.

Midland, Texas

12/30/65

(Place)

(Date)

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

PENNZOIL COMPANY

Gulf-State

Well No. 1

in SE 1/4

SE 1/4

(Company or Operator)

(Lease)

P

Sec. 32

T 16-S

R 34-E

NMPM

Wildcat

Pool

Unit Letter

Lea

County. Date Spudded 7/1/65

Date Drilling Completed

11/9/65

Please indicate location:

Elevation 4108.5 GR

Total Depth 14,585

PBD 11,011

Top Oil/Gas Pay 10,186

Name of Prod. Form. Wolfcamp

PRODUCING INTERVAL -

Perforations 10,189 - 10,197 and 10,724 - 10,734

Open Hole ---

Depth

Casing Shoe 11,011

Depth

Tubing 10,231

OIL WELL TEST -

Natural Prod. Test: --- bbls. oil, --- bbls water in --- hrs, --- min. Size ---

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 216 bbls. oil, No bbls water in 24 hrs, No min. Size Pump

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): 10189-10197 14500 Gal. Acid; 10724-10734 14500 Gal. Acid.

Casing Press. 20 Tubing Press. 20 Date first new oil run to tanks 11/23/65

Oil Transporter The Permian Corporation

Gas Transporter Undetermined

Remarks: Suggested Field Name: ANTELOPE (Wolfcamp)

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

Approved: ---, 19---

PENNZOIL COMPANY

(Company or Operator)

By: ---

(Signature)

Title Manager of Drilling & Production

Send Communications regarding well to:

Pennzoil Company

Name: ---

Address 1007 Midland Savings Building
Midland, Texas 79704

OIL CONSERVATION COMMISSION

By: ---

Title ---