REQUEST FOR (OIL) - **** ALLOWABLE

New Well

This form shall be surce sitted 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

				(Place)			<u> </u>	(Date)		
ADE HI	FRERY RE	OUESTI	NG AN ALLOW	ABLE FOR	A WELL KNO	WN AS	5:		(===,	
America:	n Petrole	um Cerp	eration Ce	noce Fede	ral , Well No	1	, in	NE 1/4	SW ,	
/ C		PROPERTY.		(Lease)	, NMPM.,					
Le		11114400000	County. Date	Spudded	5-31-61 Total D	Date D	rilling on L179	PBTD .	ALA7	
Please	indicate lo	cation:			Name of			Queen		
D C	В	A	PRODUCING INTE		and the second second second					
			Danforations	 .1 201.	341 v/2 SPF					
E F	G.	H	Open Hole		Depth Casing	Shoe	4179	Depth Tubing	41.37!	
		Andrew Control	OIL WELL TEST		The Company of the Control of the Co					
L R	J	Ī			bbls.oil,	5b1:	water in	hrs.	Chok min. Size	
			Test After Act	d A Fracture	Treatment (after	recover	of volume	of oil equ	al to volume o	
M N	1 0	P	load oil used)	, 105 bi	ols,oil,	hbls na	ter in 24	hrs,	Choke min. Size	
			GAS WELL TEST		Appendix of the second	•			_	
	- 0056	<u> </u>			· · · · · · · · · · · · · · · · · · ·	.,		Chala	C:	
	× 2376.				MCF/Day					
•	ing and Cemer				back pressure, etc.					
Size	Feet	Sax	7		e Treatment:					
3-3/8	320	Circ.	Choke Size	Method	of Testing:	'en, player veneral ? că				
4-1/2	4179	450	Acid or Fractu	re Treatment	(Give amounts of m	aterial	used, suc	heas acid,	water, oil; ar	
7-4-	1		sand): Acid-	1000 gal	acid; Sand-fr	-ao-10	,000/e1	L, 20,00	sand.	
2 *	4137		Casing Press.	Tubing Press	Date first a oil run to t	iew tanks	7-24-	<u> </u>		
			Oil Transporte	r The Po	radan Corpera	dien_	(Truck	<u>•) </u>		
			1							
marks:							/ ********			
	Complete	d 7-28-	61 as a pump	ing oil 1	rell,				••••••	
••••••						Linkin			************	
T L L		as sha inf	ormation given a	hove is true	and complete to	the best	of my kno	wledge.		
ı nereb	y ceruiy ui	at me mi	OTHERON STACES	10	POR ABOUTE	an ret	PULUE	AOT. DATES	ion	
pproved				, 1	Original 11	(Co	mpany or O	perator)		
	COMORT	NATION	COMMISSION	N.	By: V. E. STA	LEX				
OI	T CONSEI	CVALION	· COMMINISTON				(Signatur			
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	1				Name		*****	Mana Mand	l an	
					AddressBo	x 68,	Hobbs,	BON BOX	199	