

U.S.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
PRODUCTION OFFICE		
OPERATOR		

REQUEST FOR (OIL) - ~~WELL~~ 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.

Kidland, Texas

October 23, 1962

4 (Place)

(Date)

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

Great Western Drilling Company State TX, Well No. 3, in SE 1/4 NW 1/4,
(Company or Operator) (Lease)
F, Sec. 25, T. 17-S, R. 35-E, NMPM, Undesignated Pool

Lea

County. Date Spudded 6-30-1962

Date Drilling Completed 8-22-1962

Please indicate location:

Elevation 3215 Total Depth 9040 PBTD 8366

Top Oil/Gas Pay 8498 Name of Prod. Form. Abo

PRODUCING INTERVAL -

Perforations 8498 - 8853 (B.P. @ 8866)

Open Hole _____ Depth _____ Casing Shoe 9040 Depth _____ Tubing 8863

OIL WELL TEST -

Natural Prod. Test: 0 bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 28 bbls. oil, 41 bbls water in 24 hrs, _____ min. Choke 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): _____

Casing Press. _____ Tubing Press. _____ Date first new oil run to tanks 10/18/62

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter Gas flared at present.

(FOOTAGE)
Tubing, Casing and Cementing Record

Size	Feet	Sin
10-3/4	312	350
7-5/8	3435	650
4-1/2	9022	1190
2"	8363	

Remarks:

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

Approved _____, 19____

Great Western Drilling Company
(Company or Operator)

By: O.H. Crews
(Signature)

OIL CONSERVATION COMMISSION
By: Joe W. Ramsey
Title _____

Title Administrative Coordinator
Send Communications regarding well to:
Name Great Western Drilling Company
Address Box 1652