

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

August 26, 1959

(Place)

(Date)

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

BUREAU ROYALTY COMPANY Neal

Well No. 4

SE

NE

(Company or Operator)

(Lease)

1/4

Sec. 35

T. 20

R. 34

NMPM, Lynch

Pool

Unit Letter

Lea

County. Date Spudded 7/29/59

Date Drilling Completed 8/7/59

Please indicate location:

Elevation 3762.2

Total Depth 3822 PBD

Top Oil/Gas Pay 3710

Name of Prod. Form Yates

PRODUCING INTERVAL -

Perforations 3710-281 w/ 4 shots p/ft

Open Hole Depth Casing Shoe Depth Tubing 3690'

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 48 bbls. oil, 0 bbls water in 24 hrs, min. Size 1 1/2" BPG

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): SF/3000 sand 240 bbls. lease crude

Casing Tubing Date first new Press. oil run to tanks 8/24/59

Oil Transporter Texas New Mexico Pipe Line Co.

Gas Transporter None

Remarks:

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

Approved, 19

BUREAU ROYALTY COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

By: (Signature)

(Signature)

By:

Title Agent

Send Communications regarding well to:

Title

Name 800 Oil & Gas Bldg.

Address Wichita Falls, Texas