

REQUEST FOR (OIL) - ~~(GAS)~~ ALLOWABLE

New Well
~~Existing Well~~

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.

Hobbs, New Mexico April 19, 1961
(Place) (Date)

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

C. W. TRAINER
(Company or Operator)

Linam

(Lease)

, Well No. 1, in NE 1/4 NW 1/4

C

Unit Letter

Sec. 3

T. -20S

R. -35E

NMPM,

Pearl Queen

Pool

Lea

County. Date Spudded 3-16-61

Date Drilling Completed 3-27-61

Please indicate location:

Elevation 3683.5 GL

Total Depth 5040 PBD -

Top Oil/Gas Pay 4951

Name of Prod. Form. Penrose

PRODUCING INTERVAL -

Perforations 4951 - 4955

Open Hole Depth 5040 Casing Shoe 5008 Tubing 5008

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): 41.45 bbls. oil, -0- bbls. water in 24 hrs, min. Size Choke

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): 21,000 gals. oil, 7500# sand & 600# walnut hulls

Casing Tubing Date first new April 18, 1961
Press. Press. oil run to tanks

Oil Transporter The Permian Corporation

Gas Transporter

Tubing, Casing and Cementing Record

Size Feet Sax

8 5/8	95.51	90
4 1/2	5029	150
2 3/8	5003	

Remarks:

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

Approved, 19

OIL CONSERVATION COMMISSION

By:

Title

C. W. TRAINER

(Company or Operator)

By:

(Signature)

C. W. Trainer

Title

Owner - Operator

Send Communications regarding well to:

Name

C. W. TRAINER

Address P. O. Box 2222, Hobbs, N. M.