

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 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

1/10/61

(Place)

(Date)

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

CHAMBERS & KENNEDY

MONUMENT STATE

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

(Company or Operator)

(Lease)

J

34

T

19 S

R

37 E

NMPM, MONUMENT

Pool

Unit Letter

LEA

County Date Spudded 12/17/60

Date Drilling Completed 12/25/60

Elevation Est. 3575

Total Depth 3964

PBTD 3934

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J X	I
M	N	O	P

Top Oil/Gas Pay 3846

Name of Prod. Form. GRAYBURG

PRODUCING INTERVAL -

Perforations 3848 to 3858 & 3864 to 3884 60 Perfs.

Open Hole NONE

Depth

Casing Shoe 3964

Depth

Tubing 3901

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): 61 bbls.oil, 0 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): 8400 gal Refined Oil & 10,200# of frac sand

Casing

Tubing

Date first new

Press.

Press.

oil run to tanks

1/9/61

Oil Transporter THE PERMIAN CORPORATION XXXXXXXX MIDLAND

Gas Transporter NONE

Remarks: THIS WELL TREATED @ 3600 to 3800# WITH AN INJECTION RATE OF 6 bbls. PER MINUTE DOWN CSG.

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

Approved: 19

CHAMBERS & KENNEDY

(Company or Operator)

By:

(Signature)

Title ENGINEER

Send Communications regarding well to:

Name CHAMBERS & KENNEDY

Address 607 MIDLAND NAT'L BANK BLDG.
MIDLAND, TEXAS

OIL CONSERVATION COMMISSION

Title