## REQUEST FOR (OIL) - (GAR) ALLOWABLE

New 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. Cas must be reported on 15.025 psia at 60° Fahrenheit.

			Hobbs New Mexico (Place)	November 29, 1961 (Date)
WE ARE	HEREBY	REQUESTI	NG AN ALLOWABLE FOR A WELL KNOWN AS:	
		Operator)	Turner State , Well No. 1 , in. , in	
L	Letter	Sec	, T. 22.8 , R. 35.E., NMPM.,	<b>t</b> Pool
• · · · · · · · · · · · · · · · · · · ·	Lea		County. Date Spudded5/10/61 Date Drilling Con	
Please indicate location:		te location:	Elevation 3600 DF Total Depth 3956	
D	C	ВА	Top Oil/Gas Pay 3820 Name of Prod. Form. Yat.  PRODUCING INTERVAL -	G15
E	F	G H	Perforations 3847-56, 3860-64, 3868-72, 3876, 3	910-13 Depth
			Open Hole Casing Shoe 3956 OIL WELL TEST -	Tubing
L	K	JI	Natural Prod. Test:bbls.oil,bbls water in _	Choke hrs,min. Size
M	N	0 P	Test After Acid or Fracture Treatment (after recovery of volume load oil used): 25bbls.oil,20bbls water in24	Choke
			GAS WELL TEST -	
1650	)/S & 991	0/W	Natural Prod. Test: MCF/Day; Hours flowed	Choke Size
Tubing ,C	asing and (	Cementing Reco		
Size	Feet	Sax	Test After Acid or Fracture Treatment: MCF/E	
8 5/	18 29	4 200	Choke Size Method of Testing:	<del></del> -
4 1/	/2 395	6 50	Acid or Fracture Treatment (Give amounts of materials used, such	
2 3/	/8 3858	8	sand): 250 gals mud acid, 20,000 gal oil & 50,00 Casing Tubing Date first new oil run to tanks 11/23/61	
			Oil Transporter The Permian Corporation	
			Gas Transporter None	
Remarks:				
			rmation given above is true and complete to the best of my know	********
		, me con	COMMISSION By: Jr. L. Smith	erator)
	A A	JER VALION	(Signature)	(
Ву:	C. C.		Title Agent Send Communications re	garding well to:
Title		·	Name Wine G. Ross	
	/		Address Box 1094, Midland,	Texas