

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-29 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.

Odessa, Texas September 15, 1958
(Place) (Date)

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

Dixilyn Drilling Corporation Atlantic State, Well No. 1, in SE 1/4 SE 1/4,

(Company or Operator) (Lease)
P 22-S, R 35-E, NMPM, Jalnet Pool
Unit Letter
Lca

Please indicate location:

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

County. Date Spudded 7-23-58 Date Drilling Completed 8-3-58
Elevation 3623 DF 3612 GL Total Depth 4065 DF BTBD
Top Oil/Gas Pay 3906 Name of Prod. Form. Yates

PRODUCING INTERVAL -

Perforations 3906- 3988 DF

Open Hole None Depth Casing Shoe 4065 Depth Tubing 3916

OIL WELL TEST -

Natural Prod. Test: None 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): 16.50 bbls. oil, 13.50 bbls water in 24 hrs, min. Size Choke None
Pumping

GAS WELL TEST -

Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Tubing, Casing and Cementing Record

Size	Feet	Sax
8-5/8	320	200 500 10% gel.
5 1/2	4065	50 neat
2- 3/8	3916	

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): 30,000 gal jelled crude w/4# sand/gal

Casing 2300 Tubing Date first new Press. oil run to tanks 9-13-58

Oil Transporter Bruce Burney to McLeod Corp.

Gas Transporter None

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: John W. Runyan

Title

Dixilyn Drilling Corporation

(Company or Operator)

By: L.A. Pickering (Signature)

Vice President

Title Send Communications regarding well to:

Name Dixilyn Drilling Corp.

Address Box 3427, Odessa, Texas