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

New Well Reconsider

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 tase of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

				H obbs, Ne	ew Mexico	Decembe	(Date)
WE ARE H	EREBY RI	EQUESTI:	NG AN ALLOWABLE F	( ,	OWN AS:		(Datie)
Gulf. O	il Corpo	ration	Harry Leonard (	NCT+D) Well No		SE ;	/4. SE 1/4,
	npany or Ope Sec. ter		(Leas, T <b>22=S</b> , R <b>36=</b>	•	South Buni	ce	Pool
		Lea	County. Date Spudded.	11-11-59	Date Drilling (	Completed	11-19-59
Pleas	e indicate le	ocation:	Elevation 3565				
D (	В	A	Top Oil/GREX Pay 377  PRODUCING INTERVAL -	Name o	of Fred. Form.	- dreau	3833-35'
E ]	e G	Н	Perforations 3776-7	Denth		- Peath	823-25' &
			Open Hole OIL WELL TEST -	Casing	g Shoe	Tubing	3796'
L	K J	I	Natural Frod. Test:	bbls.oil,	bbls water in	nhrs,	Choke min. Size
M 1	1 0	P	Test After Acid or Fract				Choke
		-	GAS WELL TEST -	pp15,011,	DELS WATER IN	LE III'S,	min. Size w
6601	FS & EL		Natural Frod. Test:	MCF/Da	ay; Hours flowed _	Choke	Size
tubing ,Casi	ing and Ceme	nting Recor					
Size	Feet	Sax	Test After Acid or Fract	cure Treatment:	MCS	F/Day; Hours	flowed
8-5/8	3981	325	Choke Size Meth	od of Testing:			
5-1/2"	38401	400	Acid or Fracture Treatme				
2-3/8"	37961	***	sand): 18,360 gt Casing 2800 — Tubing Press. 3600#	4100- Date first	new tanks Decemb	er 9. 19	59
<u> </u>			Gil Transporter G	ilf Refining Co	0.		
			Gas Transporter W				
Remarks:		• • • • • • • • • • • • • • • • • • • •					
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T L		1-f-		ue and complete to	the best of my kno	owledge.	
			rmation given above is tr		Gulf Oil Corp	oration	
OI	L CONSER	RVATION	COMMISSION	_By:			
			<u> </u>	<b>*</b> **	Area Producti		
iy∷ <sub>ç</sub>			and the second s	Send	Communications	regarding w	rell to:
itle			<u>.t</u>		Gulf Oil Corp	oration	
				ಷಿ ಪ್ರಪ್ನೇಕ್ಷಣ್ಣ ಪ್ರಮುಖ :	Box 2167, Ho	bbs, N. J	<b>M.</b>