## REQUEST FOR (OIL) - (GAS) 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. Gas must be reported on 15.025 psia at 60° Fahrenheit.

		Denver City, Texas			7-	7-15-57				
					(Place)				(Date)	
			-	NG AN ALLOWAB						
(C	ompany	or Ope	rator)		(Lease)			•	- , .,	
Unit 1				., T21S, R						
Lea										
Plea	ase indi	icate lo	cation:	Elevation 359		_				
D	C	В	T A	Top Oil/Gas Pay	3792	Name of Prod	. Form	Iates		
				PRODUCING INTERVAL						
E	F	G	н	Perforations 3		Denth	<del></del>	Depth		
		•		Open Hole		Casing Shoe_	3916 <b>.17</b>	Tubing	3771.91	
L	K	J	<del>                                     </del>	OIL WELL TEST -					Chal	
	Δ.	J	1	Natural Prod. Test	bbls.	oil,b	bls water in	hrs,	Choke min. Size	
M	N	<u> </u>	1 1	Test After Acid or				-	Choke	
	•	O <sub>X</sub>		load oil used):	bbls.oil,	bbls	water in	hrs,	min. Size	
	<u></u>	4		GAS WELL TEST -						
	<del>-</del> -		<del></del>	Natural Prod. Test		MCF/Day; Hou	rs flowed _	Choke	Si ze	
bing ,Ca	asing an	ad Ceme	nting Recor	d Method of Testing	(pitot, back pre	ssure, etc.):				
Size	F	'eet	Sax	_ Test After Acid or	Fracture Treatm	ent: <b>822</b>	MCI	/Day; Hours	flowed 9 days	
<b>-5/8</b>	32	1.15	<b>30</b> 0	Choke Size						
<u> )/                                  </u>	75			Acid or Fracture Tr	eastmont (Give a	nounts of materi	als used, su	ch as acid.	water, oil, and	
513	390	7.22	2200	1					& 10000#_"20	
				Casino Ti	ubina D	ate first new				
				PressPr						
2-3/8	37	64.8	Ĺ	Oil Transporter						
	-	YMEN Y	<del></del>	Gas Transporter						
marks:.	••••••	•••••	• • • • • • • • • • • • • • • • • • • •					••••••••••		
••••••		•••••	•••••	••••••	***************************************		•••••••			
		•••••								
	-	-	_	rmation given above						
proved.	•••••••	••••••	·	, 19		e.Atlentic		40		
C	OIL CO	NSER	VATION	COMMISSION	By :	Teal Mc	Cashel	<u> </u>		
						Noal McCaskill (Signature)				
/:			1/	Man-	Title.	Acting Di	strict 9	upt.	ell to:	
ala.		F						regarding w	en w.	
tle	***************************************	•••••	************	•••••••••••••••••••••••••••••••••••••••	Name	N. A. Ca	rr			
					<b>≜</b> ddr	Box 1038	. Denver	City_ Te	x	

