NEW MEXICO OIL CONSERVATION COMMISSION Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well Recorderation

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 pil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

				Hobbs, New Mexico December 31, 1957 (Place) (Date)
WE ARI	E HER	EBY RE	QUESTI:	NG AN ALLOWABLE FOR A WELL KNOWN AS:
				Brownlee , Well No. 1 , in SL: 1/4 SE 1/4,
	Compar	ny or Oper	ator)	(Lease)
P , Sec.25			25	, T21S, R. 36E, NMPM., Arrowhead Pool
Lea				County Date Spudded. 11-25-57 Date Drilling Completed 12-13-57
Please indicate location:				Elevation 3,536 DF Total Depth 3,790 FBTD 3,715
				Top Oil/Gas Pay 3,694 Name of Frod. Form. Grayburg
D	С	В	A	PRODUCING INTERVAL -
				Perforations 3,694-3,710'
E	F	G	H	Depth Depth Depth Depth Depth Depth Tuting 3,705
				OIL WELL TEST -
L	K	J	I	Choke Street:bbls.oil,bbls water inhrs,min. Size
				Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of
M	N	0	P	load oil used): <u>10</u> bbls.oil, <u>20</u> ttls water in <u>24</u> hrs,min. Size <u>1/2</u> "
			0	
				GAS WELL TEST -
<u> </u>				
			ting Recor	
Size		Feet Sax		Test After Acid or Fracture Treatment:MCF/Day; Hours flowed
0 5	/o n	325	250	Choke SizeMethod of Testing:
<u>8 5/8"</u>				Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and
5 1/	/2"	3709	250	
				sand): 6,000 gallons oil, 3,000# sand Casing Tubing Date first new Press. 3,700 Press 4,100 oil run to tanks December 28, 1957
		+		Oil Transporter McWood Corporation
		t	uont i	Gas Transporter
Remark	s :	Areq		11y Pool.
		Penr.o	<u>se oke</u>	
				action shows is true and complete to the best of my knowledge.
I h	ereby c	ertily that	it the inio	rmation given above is true and complete to the best of my knowledge. J. H. Moore (Company or Operator)
Approve				
	OIL	CONSER	VATIOŅ	COMMISSION By: A. MOOLE (Signature)
By:				Title Operator
By:				Send Communications regarding well to:
Title		,		Name. J. H. Moore
				Address. Box 1537, Hobbs, New Mexico
				Address