REQUEST FOR (OIL) - (CAS) 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.

				Eunice,New		2-19-62(Date)	
E ARE H	EREBY RE	QUESTI	NG AN ALLOWABL	E FOR A WELL KNO	WN AS:	of the last	
Cont	inental	Oil C	ompany Mey	erB-4, Well No	19 , in	SW /4 SE 1/4,	
Con Lot N	opany or Oper	4	, T. 21S , R.	36E , NMPM.,	Undesignat	ed // Pool	
			County. Date Spud	ded 11-18-61	Date Drilling Com	npleted2-5-62	
Pleas	e indicate lo	cation:	Elevation 3	ded11-18-61 5821 KBTotal De	12,010	PBTD 6,020*	
D	В	A	PRODUCING INTERVAL	Name of	Pred. Form. B1	INCOLA	
E :	F G	H	Perforations 59	07-17' 5922-25	5928-321	5940-461 Depth 59351	
			Open Hole	Casing	onde OOTO	Tucing	
L	K J	I		bbls.oil,	bbls water in	Choke hrs, min. Size	
V	N O	P		Fracture Treatment (after a		Choke	
M	Let		load oil used): 1	58 bbls.oil, <u>3</u>	obls water in <u>17</u>	_hrs,min. Size 18/6	
	112	<u></u>		MCE/Day	· Hours flowed	Choke Size	
Mng Cae	ing and Cemer	ting Recor		pitot, back pressure, etc.			
Size	Feet	Sax				Day; Hours flowed	
2 2/4	21.5	200		Method of Testing:			
.5 3/6	345	300	- English To	notmant (Give amounts of m	aterials used, such	n as acid, water, oil, and	
9 5/8	5446	525		1. 154 LSTNR 4.	atomer	using ball seels	
5 1/2	1,023	325	Casing Tu	bing Date first needs. 460 Date first needs oil run to to	ew anks 2-11	-62	
<u> </u>	2,000	<u> </u>	_	tlantic Pipe Lir			
			Gas Transporter C	ontinental Carbo	<u>)n</u>		
emarks:	• • • • • • • • • • • • • • • • • • • •						
						1 1	
			ormation given above	is true and complete to the Continer	ntal Oil Co (Company or P	mpany	
	1		I COMMISSION	By:	//-	Blacker	
y:				Title Distr	Title. District Superintendent Send Communications regarding well to:		
le		<i></i>			Parker		
	/			Name. M.a A.	rarker		