REQUEST FOR (OIL) - (GAS) ALLOWABLE

Nev	w V	Vel	!
	12	K.	IJ
	7.0	0	

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 called 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.

Conti	nental ompany or O	Oil Comperator	ing an allowable for a well known as: pany Leekhart B-11 , well no 15-TB-D , in NW
			County Date Spudded 1-12-60 Date Drilling Completed 2-10-60
Ple	se indicate	location:	Elevation 3448 KB Total Depth 6760 PBTD
D	C B	A	Top Oil/Sex Pay 5752' Name of Prod. Form. Blinebry PRODUCING INTERVAL -
E	F G	Н	Perforation 5752-62, 5774-5818, 5823-29, 5833-38, 5850-561 Open Hole
L	K J	I	OIL WELL TEST - Choke Natural Prod. Test:bbls.oil,bbls water inhrs,min. Size
M	N O	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 128 bbls.oil, 5 bbls water in 15 hrs, min. Size 18/
			GAS WELL TEST -
uding ,Ce Sire	sing and Con Feet	menting Reco	Method of Testing (pitot, back pressure, etc.): Test After Acid or Fracture Treatment: MCF/Day; Fours flowed MCF/Day; Hours flowed
3 3/8	294	260	Choke SizeMethod of Testing:
9 5/8	3013	1150	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 500 gals acid, 10,000 gals acidfrac, 5000 lbs sd.
7	6818	500	Casing Press. 180 Date first new oil run to tanks 3-18-60
2	5875		Oil Transporter Texas New Mexico Pipe Line
emarks:	his wel	l is a	Gas Transporter Skelly oil-oil dual completion in the Drinkard & Blinebry Zor
		West	il Olyses 3 porce of Cirillian
	C 03209		Ender Brank that
I here pproved.		hat the info VAR 2	ormation given above is true and complete to the best of my knowledge. Continental Oil Company Company or Operator)
	IL CONSE	RVATION	COMMISSION By: (Signature) Tiple District Superintendent
μ· 		- Artin	Send Communications regarding well to:
itle			Name J. R. Parker
0/3	MACC	WAM 1	file Address Bex 68 Eunice, New Mexico