

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

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

Sunice, New Mexico

June 19, 1956

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Amerada Petroleum Corporation - J.G. Randle "A", Well No. **1**, in **SE 1/4** **NW 1/4**,
(Company or Operator) (Lease)

F, Sec. **20**, T. **21-S**, R. **37-E**, NMPM., **Elinebry** Pool
(Unit)

Lea County. Date Spudded....., Date Completed **6-8-56**

Please indicate location:

R-37-E

T
21
S

. #1

Elevation **3515'** D.F. Total Depth **6680'**, P.B. - **6570'**Top oil/gas pay **5687'** Top of Prod. Form **Elinebry**Casing Perforations: **5687'-5700'**, **5712'-5750'**, **5770'-5830'** or

Depth to Casing shoe of Prod. String.....

Natural Prod. Test..... BOPD

based on..... bbls. Oil in..... Hrs..... Mins.

Test after acid or shot..... BOPD

Based on..... bbls. Oil in..... Hrs..... Mins.

Gas Well Potential **1,280,000 cu ft gas p/d. - absolute open flow potential**

Size choke in inches.....

Date first oil run to tanks or gas to Transmission system:.....

Transporter taking Oil or Gas:.....

Casing and Cementing Record

Size Feet Sax

13-3/8"	152'	200
8-5/8"	2868'	1550
5-1/2"	6650'	600

Remarks: **Gas Well - Acidized down 2-3/8" Tubing & 5 1/2" OD Casing perforations from 5687'-5700', 5712'-5750', 5770'-5830' with 10,000 gallons of 15% R.L.S.T. Acid.-**

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved....., 19.....

Amerada Petroleum Corporation
(Company or Operator)

OIL CONSERVATION COMMISSION

By: *[Signature]*
(Signature)

By: *[Signature]*Title **Foreman**

Send Communications regarding well to:

Title.....

Name **Amerada Petroleum Corporation**Address **Box 706, Sunice, New Mexico**