

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 QUADRUPPLICATE 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.

Hobbs, New Mexico
(Place)

October 8, 1958
(Date)

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

Albert Gackle, Operator **H. E. Esmond**, Well No. **4**, in **SW** $\frac{1}{4}$ **NE** $\frac{1}{4}$,

(Company or Operator) (Lease)
G **33** **T 22S** **R 36E**, **NMPM**, **South Eunice** Pool

Unit Letter
Lea

County **Lea** Date Spudded **3-20-58** Date Drilling Completed **9-15-58**
Elevation **3492' G.L.** Total Depth **4005'** PBD **3918'**

Top Oil/Gas Pay **3616'** Name of Prod. Form. **7 Rivers, Queen**

PRODUCING INTERVAL - **3824'-28'; 3848'-52'**

Perforations **3616'-22'; 3689-3703'; 3726'-36'; 3766'-74'; 3800'-08'**

Open Hole _____ Depth **4005'** Depth **3910'**
Casing Shoe _____ Tubing _____

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **180** bbls. oil, **6** bbls water in **24** hrs, _____ min. Size **20/64** Choke

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): **25,000 gal oil, 25,000's sd, 1,500 gal acid, 160 Ball Sealers**

Casing **250** Tubing **550** Date first new **10-7-58**
Press. **250** Press. **550** oil run to tanks

Oil Transporter **Shell Pipe Line Company**

Gas Transporter **Phillips Petroleum Company**

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	330'	250
5 1/2	4005'	2300

Remarks: _____

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

Approved: _____, 19 _____ **Albert Gackle, Operator**

(Signature of Operator)

PAUL S. JOHNSTON

By: _____ (Signature)

Title **Superintendent of Production**
Send Communications regarding well to:

Name **Paul S. Johnston**

Address **Box 2076, Hobbs, New Mexico**

OIL CONSERVATION COMMISSION

By: _____

Title _____