

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.

Midland, Texas

2-17-58

(Place)

(Date)

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

Western Natural Gas Company

Hale

Well No. 4

in NW

SW

1/4

(Company or Operator)

(Lease)

L

34

T. 22-S

R. 36-E

South Eunice

Pool

Unit Letter

Lea

County. Date Spudded. 1-30-58

Date Drilling Completed 2-10-58

Please indicate location:

Elevation 3477.9

Total Depth 3760

PBTD

3755

Top Oil/Gas Pay 3672

Name of Prod. Form.

Lower 7 Rivers-Queens

PRODUCING INTERVAL -

Perforations 3672-3686, 3696-3710, 3716-3724 w/4 jet shots per ft.

Open Hole -

Depth

Depth

3682

OIL WELL TEST -

Natural Prod. Test: None bbls. oil, bbls water in hrs, min. Size

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 45.2 bbls. oil, bbls water in 2 hrs, min. Size 22/64

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): 15,000 gal gelled oil, 15,000# ad, 1500 gal reg. acid, 120 ball sealers.

Casing Press. 975 Tubing Press. 490 Date first new oil run to tanks 2-14-58

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter None

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	1397	500
5 1/2	3751	500
2 3/8	3674	-

Remarks:

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

Approved: 19

WESTERN NATURAL GAS COMPANY

(Company or Operator)

OIL CONSERVATION COMMISSION

By:

(Signature)

Title

Office Manager

Send Communications regarding well to:

Name Western Natural Gas Company

Address 823 Midland Tower, Midland, Texas

By:

Title