

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

Big Spring, Texas

August 30, 1962

(Place)

(Date)

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

CODDEN PETROLEUM CORPORATION

E. Butler

Well No. **5**, in **SE** $\frac{1}{4}$ **NW** $\frac{1}{4}$.

(Company or Operator)

(Lease)

P

18

228

308

NMFM,

Blinnery

Pool

Unit Letter

Lee

Re-completed

~~Re-drilling completed~~

8-25-62

Please indicate location:

County Date Sp. (acid)

Elevation **5,628**

Total Depth **7,127**

FRTD **5,805**

Top Oil/Gas Pay **5,628**

Name of Prod. Form.

Blinnery

PRODUCING INTERVAL -

Perforations **5628-36; 5642-54; 5658-68; 5700-18; 5724-30**

Open Hole

Depth

Casing Shoe

Depth

Tubing

5,543'

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): **120** bbls. oil, **-0-** bbls. water in **24** hrs, **0** min. Choke Size **18/64**

GAS WELL TEST -

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

Method of Testing (spot, 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): **500 gal MA, 5,000 gal Reg. acid, 18,500 gal oil & 37,000# Sand**

Casing Press. **750#** Casing **150#** Date first new oil run to tanks **8-26-62**

Oil Transporter **Ten-New Mexico Pipe Line Co.**

Gas Transporter **Warren Petroleum Corporation**

Tubing, Casing and Cementing Record

Size	Feet	Sack
13-3/8	137	250
8-5/8	2,858	750
5-1/2	6,910	750

Remarks:

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

Approved: _____

CODDEN PETROLEUM CORPORATION

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

(Signature)

H. L. Weeks

Supt. of Production

Send Communications regarding well to:

Codden Petroleum Corporation

Address: **Box 1311, Big Spring, Texas**

By: _____

Title _____

Form C-110
Revised 7/1/55

**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Company or Operator COSDEN PETROLEUM CORPORATION Lease E. Butler

Well No. 5 Unit Letter F S 18 T 225 R 38 Pool Blinchry

County Los Kind of Lease (State, Fed. or Patented) Patented

If well produces oil or condensate, give location of tanks: Unit K S 18 T 228 R 308

Authorized Transporter of Oil or Condensate Texas-New Mexico Pipe Line Co.

Address Box 1516, Midland, Texas
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Warren Petroleum Corporation

Address Box 1589, Tulsa 2, Oklahoma
(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well _____ ()

Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()

Change in Ownership () Other 1

Remarks: (Give explanation below)

Well plugged back from Drinkard to Blinberry oil zone.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 5 day of September 19 62

By L. M. Thompson L.M. Thompson

Approved 19

Title Vice President - Production

OIL CONSERVATION COMMISSION

Company **Cooper Petroleum Corporation**

By _____

Address Box 1911

Title _____

Big Spring, Texas