

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.

Midland, Texas

August 26, 1965

(Place)

(Date)

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

A. G. McCarver, dba P-M Drilling Co. Federal Payne Well No. 3, in NW 1/4 SW 1/4,
(Company or Operator) (Lease)

L, Sec. 35, T. 23 S., R. 32 E., NMPM, Trista Draw Pool
Unit Letter

Lea County. Date Spudded Aug. 8, 1965 Date Drilling Completed Aug. 21, 1965

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P

Elevation 3622 G.L. Total Depth 5026' PBD

Top Oil/Gas Pay 4940' Name of Prod. Form Delaware Sand

PRODUCING INTERVAL -

Perforations 4944' to 48', 4949' to 54', 4956' to 59', 4960' to 68'

Open Hole Depth Casing Shoe 5026' Depth Tubing 4930'

OIL WELL TEST -

Natural Prod. Test: 51 bbls. oil, 5 bbls water in 24 hrs, 0 min. Choke Size 18/64"

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

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):

Casing Tubing Date first new Press. 370# Press. 150# oil run to tanks August 25, 1965

Oil Transporter The Permian Corporation

Gas Transporter

Tubing, Casing and Cementing Record

Size Feet Sax

10 3/4"	301	200
4 1/2"	5026	200
2"	4930	

Remarks:

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

Approved: A. G. McCarver, dba P-M Drilling Company
(Company or Operator)

By: (Signature)
(Signature)

By:

Title

Title Supt.

Send Communications regarding well to:

Name P-M Drilling Company

2900 North Big Spring

Address Midland, Texas 79704