

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.

Roswell, New Mexico
(Place)

August 20, 1962
(Date)

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

Charles B. Read Bradley, Well No. 2, in SE $\frac{1}{4}$ NE $\frac{1}{4}$,
(Company or Operator) (Lease)

H 22 24S 32E NMPM, Double X Pool
Unit Letter

Lea

Please indicate location:

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

1980' FNL & 990' FEL

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8 5/8"</u>	<u>330'</u>	<u>150</u>
<u>4 1/2"</u>	<u>4976'</u>	<u>100</u>

County. Date Spudded 7/25/62 Date Drilling Completed 8/18/62
Elevation GL 3594.6 Total Depth 4976' PBTD 4942'

Top Oil/Gas Pay 4912' Name of Prod. Form. Delaware Sand

PRODUCING INTERVAL -

Perforations 4912-18'
Open Hole _____ Depth _____
Casing Shoe 4975' Tubing 4907'

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): 43 bbls. oil, 79 bbls water in 24 hrs, _____ min. Size 2" Choke Open

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): 750 Gals. MCA acid-Sand Frac 4000 Gals. crude oil. 6000# Sand

Casing _____ Tubing _____ Date first new _____
Press. 140# Press. 390# oil run to tanks 8/18/62

Oil Transporter The Permian Corporation

Gas Transporter _____

Remarks: The above potential is based on swab tests.

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

Approved August 21, 19 62

Charles B. Read

OIL CONSERVATION COMMISSION

By: [Signature]
(Company or Operator)
(Signature)

Title Operator

Send Communications regarding well to:

Name _____

Address _____

By: _____

Title _____