

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.

Unice, New Mexico
(Place)

June 6, 1960
(Date)

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

Continental Oil Company Wilder, Well No. 23, in NW 1/4 NW 1/4,
(Company or Operator) (Lease)

D 25, T. 26-S, R. 32-E, NMPM, El Mar Delaware Pool
Unit Lea

County. Unice Date Spudded 5-19-60 Date Drilling Completed 5-30-60

Elevation 3129' KB Total Depth 4684 PBD

Top Oil/Gas Pay 4639 Name of Prod. Form. Delaware Sand

PRODUCING INTERVAL -

Perforations 4639-42', 4644-48' w/4 JSFF

Open Hole _____ Depth _____ Casing Shoe 4684' Depth _____ Tubing 4596'

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): 45 bbls. oil, 3 bbls water in 4 hrs, _____ min. Choke Size 12/64"

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): See Below

Casing 150 Tubing 300 Date first new 6-2-60
Press. oil run to tanks

Oil Transporter Cactus Petroleum, Inc.

Gas Transporter None

Tubing, Casing and Cementing Record

Size	Feet	Sax
7-5/8	329	175
4-1/2	4706	2275 cu. ft.
2"	4613	

Remarks: Trtd w/500 gals acid, fraced with 3000 gals crude, 4500 lbs sand, 150 lbs Adomite.

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

Approved: _____, 19____

Continental Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____
(Signature)

By: _____

Title District Superintendent

Title _____

Send Communications regarding well to:

Name J. R. Parker

Address Box 68, Unice, New Mexico