

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
XXXXXXXXXX

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.

Eunice, New Mexico February 26, 1960
(Place) (Date)

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

Continental Oil Company Wilder, Well No. 17, in NE 1/4 SE 1/4,
(Company or Operator) (Lease)
I, Sec 26, T. 26-S, R. 32-E, NMPM, El Mar Delaware Pool
Unit Letter

Lea

Please indicate location:

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

County. Date Spudded 2-10-60 Date Drilling Completed 2-22-60
Elevation 3114' KB Total Depth 4691' PBTD

Top Oil/Gas Pay 4594' Name of Prod. Form. Delaware Sand

PRODUCING INTERVAL -

Perforations 4594-4602' W/4 JSPF

Open Hole Depth 4691' Depth Casing Shoe 4570' Tubing

OIL WELL TEST -

Natural Prod. Test: 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): 104 bbls. oil, 0 bbls water in 4 hrs, min. Size 20/64'

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): TRTD W/250 gals Mud Acid, fraced W/3000 gals crude

Casing 4500 lbs sd, 150 lbs cement
Press. oil run to tanks 2-26-60

Oil Transporter Cactus Petroleum, Inc

Gas Transporter None

Remarks: LC 069515

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

Approved: Continental Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: (Signature)

Title: District Superintendent

Send Communications regarding well to:

Name: J. R. Parker

Address: Box 68, Eunice, New Mexico

0/3 NMOCC WAM file