## 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 October 16, 19 (Place) (Date)	61
WE ARE I	EREBY R	EQUESTI	NG AN ALLOWABLE FOR A WELL KNOWN AS:	
	O11 Corp		Hughes A=2 , Well No. 10 , in NE 1/4 SE 1/2	4,
•	Sec		T23-S , R37-E , NMPM , Langlie-Mattix Po	ol
•			County. Date Spudded 9-26-61 Date Drilling Completed 10-3-61	
	se indicate l		Elevation GI. 3294 Total Depth 3665 PBTD 3645	-
D	C B	A	Top Oil/Gas Pay 3520 Name of Prod. Form. Penrose Sand  PRODUCING INTERVAL - 3520 - 32, 3540- 46, 3558 - 62, 3570 - 80,	-
E	F G	H	Perforations 3585 - 87, 3598 - 3602, 3606 - 10, 3613 - 15, 3626 -  Depth Open Hole None Casing Shoe 3664 Tubing 3488	_32 _
L	K J	I	OIL WELL TEST - Choke  Natural Prod. Test:bbls.oil,bbls water inhrs,min. Size	
M	N O	P	Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 132 bbls.oil, 0 bbls water in 24 hrs, 0 min. Size 18	
			GAS WELL TEST -  Natural Prod. Test:MCF/Day; Hours flowedChoke Size	_
Tubing ,Cas Size	ing and Com	enting Recor	Method of Testing (pitot, back pressure, etc.):	_
8-5/8"	374	175	Choke Size Method of Testing:	_
5-1/2"	<b>36</b> 64	200	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and	=
through	Tool Set 1146	75	sand): Sand-Oil treated 40,000 gallons oil and 60,000# Sand Casing Tubing Date first new Press. 550 Press. 400 oil run to tanks October 14, 1961	
2-3/8"	3488		Oil Transporter Shall Pine Line	-
			Gas Transporter Skelly Oil Company	_
				. <b></b>
			ormation given above is true and complete to the best of my knowledge.  19 Samedan Oil Corporation	
Approved	.—·	F	(Company or Operator)	
OI	L CONSEI	RVATION	COMMISSION By: (Signature)	
Ву:		7	Title Production Superintendent Send Communications regarding well to:	
Title			Name Samedan Oil Corporation	<i>~</i> ^

Addres 02 Y & J Tower ... Midland, Texas