

REQUEST FOR (OIL) - ~~ALLOWABLE~~ 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.

Midland, Texas

September 21, 1960

(Place)

(Date)

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

Great Western Drilling Company H. Leonard "H", Well No. 5, in NE 1/4, NE 1/4,
(Company or Operator) (Lease)

A, Sec. 32, T. 23-S, R. 37-E, NMPM., Langlie Mattix Pool

Unit Letter
Lea

County. Date Spudded Aug. 24, 1960 Date Drilling Completed Sept. 13, 1960

Please indicate location:

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

Elevation 3282 Total Depth 3716 PBD 3525

Top Oil/Gas Pay 3472 Name of Prod. Form. Queen (Penrose)

PRODUCING INTERVAL -

Perforations 3472-3572

Open Hole Depth 3713 Casing Shoe Depth 3620 Tubing

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 Choke load oil used): 40 bbls. oil, 0 bbls water in 24 hrs, 0 min. 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): 40,000 gal. refined oil plus 80,000# sand

Casing 200 Tubing P Date first new oil run to tanks September 19, 1960
Press. Press.

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter

Remarks:

Gas - Oil Ratio 980

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

Approved: Great Western Drilling Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: Leslie A. Clements

Title

By: O.H. Crews
(Signature)

Title Administrative Coordinator

Send Communications regarding well to:

Name: Great Western Drilling Company

Address: Box 1639, Midland, Texas

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Great Western Drilling Company Lease H. Leonard "B"
Well No. 5 Unit Letter A S 32 T 23-R 37-E Pool Langlie Mattix
County Lea Kind of Lease (State, Fed. or Patented) State
If well produces oil or condensate, give location of tanks: Unit B S32 T 23 R 37
Authorized Transporter of Oil or Condensate Texas-New Mexico Pipe Line Company
Address Box 1510 - Midland, Texas
(Give address to which approved copy of this form is to be sent)
Authorized Transporter of Gas El Paso Natural Gas Company
Address El Paso, Texas Date Connected Sept. 19, 1960
(Give address to which approved copy of this form is to be sent)
If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well ()
Change in Transporter of (Check One): Oil () Dry Gas () C'head () Condensate ()
Change in Ownership () Other ()
Remarks: (Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 23rd day of September 19 60

Approved _____ 19 _____

OIL CONSERVATION COMMISSION
By Leslie A. Clements
Title _____

By O. H. Crews O. H. Crews

Title Administrative Coordinator

Company Great Western Drilling Company

Address Box 1659, Midland, Texas