Santa Fe, New Mexico

(Form C-104) Revised 7/1/57

REQUEST FOR (OIL) HOGAS) 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	Nov	. 14, 1958
WE AR	E HER	EBY RE	QUESTI	NG AN ALLOW	ABLE FO	RA WELL KI	NOWN AS:		(Date)
Ander	Compar	richer v or Oper	(d 011	Corporation)n / (Lesse)	Well No.	4 , ;	in SK	1/4 NW 1/4
			•	, T. 258			Justia	••••••	Pool
•	• –	•••••		County. Date	Spudded 8	/26/58	Date Drilling	r. Completed	11/12/58
		dicate lo		Elevation	1085' G	LTota	1 Depth 7020	PBTD	
D	С	В	A	Top Oil/Gas Pay	<u>. 6996</u>	Name	of Prod. Form.	Fusselm	<u>an</u>
				PRODUCING INTER	==				
E	F	G	H	Perforations_	1996-7 0	17' - 4-1/ Depti	holes p	er foot Depth	20101
	X							•	7015'
L	K	J	I			_	by pumpin		Choke
									,min- Size
M	N	0	P				er recovery of vol bbls water in _		qual to volume of Choke
				GAS WELL TEST -					min. Size
						MCF/I	Day; Hours flowed	Chake	a Simo
Tubing ,	Casing a	and Gement	ing Recor				tc.):		
Size	•	Feet	Sax				N		
13.3/	,	560	450	Choke Size	Method	of Testing:			
				Acid or Fractur	e Treatment	(Give amounts of	materials used,	such as acid,	water, oil, and
9 5/	8 33	190 1	775	sand):		_None			
2	10,	19/	050	Casing Press.	Tubing Press.	Date first oil run to	new tanks /	1/12/	58
				Oil Transporter	Texa	Leller Mexi	co Pipe Li	ne Co.	
				Transporter	El P	seo Natura	1 Gas Co.		···
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I ne	reby cer	LLLY LINE		n given ab	ove is true	and complete to	the best of my ki	nowledge.	
Approved	d	lov. 1	3, 195	8	, 19	Anderse		OH Con	poration
	017 04						Company or	perator)	2
	OIL CO	JUSEKV	ATION	COMMISSION	//2	Ву:	(Signal	cure)	
Ву:	Je i i		(Ing	1/28/1			trict Supe		
Title				-		_	Communication	s regarding v	ven to:
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			NameL.	H. Foster	· · · · · · · · · · · · · · · · · · ·	

Address....Box 196, Midland, Texas