

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 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.

Fort Worth, Texas

9-18-58

(Place)

(Date)

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

Gulf Oil Corporation Leary Subarrington

SW

SE

, Well No. _____, in _____ 1/4 _____ 1/4,

(Company or Operator)

(Lease)

0

Sec. 13

T. 25-S

R. 37-E

NMPM.

Justin Gas

Pool

Unit Letter

Lee

County. Date Spudded. 6-12-57

Date Drilling Completed

4-22-58

Please indicate location:

Elevation 3083' Total Depth 4732' PBTD 4141'

Top Oil/Gas Pay 4732' Name of Prod. Form. Glorietta

PRODUCING INTERVAL -

Perforations 4732-4766', 4788-4806', 4846-4856', 4862-4870'

Open Hole _____ Depth _____ Casing Shoe 4775' Depth _____ Tubing _____

OIL WELL TEST -

Natural Prod. Test: _____ in _____ hrs, _____ min. Choke _____

Test After Acid _____

load oil used): _____

GAS WELL TEST -

Natural Prod. Test: _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.):

Test After Acid or Fracture Treatment: 6000 MCF/Day; Hours flowed 2 1/4

Choke Size _____ Method of Testing: 4" orifice well test, and 1275 psi back-pressure

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and

sand): _____

Casing _____ Tubing _____ Date first new _____

Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter El Paso Natural Gas Company

Filed in compliance with Rule 11, Order R-386-C.

Remarks:

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

Approved: _____, 19_____

OIL CONSERVATION COMMISSION

(Company or Operator)

By: J. H. King, Jr.

(Signature)

Title: Unit Supervisor

Send Communications regarding well to:

Gulf Oil Corporation

Name: _____

Hobbs, New Mexico

Address: _____