REQUEST FOR (OIL) - (GAS) ALLOWATISEOFFICE OCKEOW 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 td3565Fpor24C-10Mw40sen1 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 23, (Place) (Date)	1959
E ARE F	IEREBY R	EQUEST	ING AN ALLOWARIE FOR A WELL KNOWN AS:	
Inders	on-Pric	hard 0	Dil Corporation Carlson B, Well No. 1 in SE 1/4 SE	¼.
Unit Le	Sec ^{Her}		T -25-8 R-37-E NMPM, Justis Blinebry	Pool
	Lea		County. Date Spudded June 3, 1959 Date Drilling Completed July 14	4. 19
Pleas	e indicate		Elevation 3090 Total Depth 5965 PBTD 5934	
		1 .	Top Oil/Gas Pay 5410 Name of Prod. Form. Blinebry	
D	CB	A .	PRODUCING INTERVAL -	
			Perforations 5410-5446	
E	F G	H	Open Hole Depth Casing Shoe 5965 Depth Tubing 5370	
L	KJ	I	OIL WELL TEST -	Choke
_	_ `	•	Natural Prod. Test: 9 bbls.oil, 55 bbls water in 13 hrs, min.	Size
			Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume	me.of
M	N O	P	load oil used): 77.24bbls.oil, 56 bbls water in 19 hrs, 0 min. Size	<u>12/64</u>
			GAS WELL TEST -	
60'FS	7L + 330	FIEL		
	ing and Com			
Size	Feet	Sax		
			Test After Acid or Fracture Treatment: MCF/Day; Hours flowed	
3-3/8	566	500	Choke Size Method of Testing:	
			Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil,	and
9-5/8	3334	1850	sand): 500 gal MA 2000 gal regular acid	
_			Casing acker Tubing Press. 510 Date first new oil run to tanks 9-16-59	
1	5965	540	Oil Transporter Texas-New Mexico Pipe Line Co.	
		 	Gas Transporter	
marks:				
••••••		•••••	July De Dining Oxla	•••••
		•••••••		••••••
I hereb	-		formation given above is true and complete to the best of my knowledge.	
proved	······································	Sep. 2.9.	10/59 , 19 Anderson-Prichard Oil Corporation (Company of Operator)	70
OI	L CONSEI	RVATION	COMMISSION By: (Signature)	
11	2/ (///	Metrict Clark	
: .L.E			Title Send Communications regarding well to:	
le				
		ីកម្វាក់ខ	Name. L. H. Foster	
			Box 196, Widland, Texas	