## NEW EXICO OIL CONSERVATION COMM NON Santa Fe, New Mexico

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

## 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.	•••••	3-12-58 (Date)
DUAL	COMP	LETIO	N OUESTIN	NG AN ALLOWABLE FOR	( ·	AS:	, ,
Wester	n Nat	ural	Gas Comp	any Wimberley	, Well No4	, inSW	
	C	One	-AMP)	(Lesse) ., T25S, R37E			
21-20	Latiter						
	Lea			County. Date Spudded. 1	14-58 Date	Drilling Complet	ted 3-5-58
Pl	ease inc	licate lo	cation:	Elevation 3076.2 G. L			
	C	В	A	Top Oil/Gas Pay 6720	Name of Prod.	rorm. ruse	<u> </u>
				PRODUCING INTERVAL -	40.00.00	e a a b	
E	F	G	H	Perforations 6840-6950	Depth Depth	er loot	epth 6019
1 - 1	•		"	Open Hole	Casing Shoe	T	ubing 0948
2	K	J	I	OIL WELL TEST -			Choke
L	V	"		Natural Prod. Test: none			
	- 43			Test After Acid or Fracture			
M	N	0	P	load oil used): 117.6bb	ls,oil,bbls	vater in <u>2</u> hr	s,min. Size_32/6/
				GAS WELL TEST -			
				Natural Prod. Test:			
Tubing ,	Casing	and Ceme	nting Recor				
Sire		Feet	Sax	Test After Acid or Fracture			
13 3	/2	536	500	Choke SizeMethod	of Testing:		
42.3	70	7.70		Acid or Fracture Treatment	(Give amounts of materia	als used, such as	acid, water, oil, and
9.5	/8 3	387	2000	sand): 24 Bbls Regular 15% acid.			
_			000	Casing Tubing Press Pkr Press		3-10-58	
7	$-+^{7}$	230	998	Oil Transporter Texas			
2 3	8/8 6	948	-	Gas Transporter E Pa	so Natural Gas Co	mpany	
Remark	s:			***************************************	*************************	******	
					************************		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
I h	ereby c	ertify tl	nat the infe	ormation given above is true	and complete to the be	st of my knowles	ige.
				, 19	Westlern Matu	cal Gas Comp Company of Oper	<b>ANY</b>
					/ HW	(100)	umai
	OIL (	CONSE	RVATION	N COMMISSION	Ву:	(Signature)	
D	1	. 9	ff	hall !	Title Office M	enager	- line well so:
Dy:	CHANT.	······		Ar. W	Send Com	munications rega	raing wen to.
Title	······				NameWestern	Netural Gas	Company
					Address 823 Midl	and Tower,	Midland, Texas