

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (GAS) ALLOWABLE

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 6-4-58

(Place)

(Date)

Dual Completion

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

Western Natural Gas Company Wimberley, Well No. 5, in NE 1/4 NW 1/4,  
(Company or Operator) (Lease)

C, Sec. 24, T. 25, R. 37, NMPM, Justis - Ellenberger Pool

Lea

Please indicate location:

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

County. Date Spudded 3-22-58 Date Drilling Completed 5-28-58  
Elevation 3077.6 GL Total Depth 8210 PBD 8210

Top Oil/Gas Pay 8080 Name of Prod. Form. Ellenberger

PRODUCING INTERVAL -

Perforations None

Open Hole 125' Depth 8084 Depth Casing Shoe 8188.98

OIL WELL TEST -

Natural Prod. Test: 113 bbls. oil, - bbls water in 6 hrs, - min. Choke 28/64

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): - bbls. oil, - bbls water in - hrs, - min. Choke -

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):

Casing Tubing Date first new  
Press. 400 oil run to tanks 6/1/58

Oil Transporter Texas - New Mexico Pipeline Company

Gas Transporter El Paso Natural Gas Company

Remarks: *Change from 28/64 to 28/64*

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

Approved: 19

Western Natural Gas Company

(Company or Operator)

By: (Signature)

Title: Petroleum Engineer

Send Communications regarding well to:

Name: Western Natural Gas Company

Address: 823 Midland Tower, Midland, Texas

OIL CONSERVATION COMMISSION

By: (Signature)

Title: