

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-104 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 5-18-59
(Place) (Date)

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

Anderson-Prichard Oil Corp. Carlson A, Well No. 1, in NW 1/4 SE 1/4,
(Company or Operator) (Lease)
J, Sec. 25, T. 25-S, R. 37-E, NMPM, Justis Fusselman Pool
Unit Letter

Lea County. Date Spudded 2-20-59 Date Drilling Completed 3-26-59
Elevation 3070' Total Depth 6954' PBD

Please indicate location:

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

Top Oil/Gas Pay 6896' Name of Prod. Form. Fusselman

PRODUCING INTERVAL -

Perforations 6896' - 6950' 4 shots per ft.

Open Hole Depth Casing Shoe 6953' Depth Tubing 6945'

OIL WELL TEST -

Natural Prod. Test: 47.92 bbls. oil, 7 bbls water in 7 hrs, min. Choke Size 12/64

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used) 111.72 bbls. oil, 9 bbls water in 24 hrs, min. Choke Size 12/64

GAS WELL TEST -

2310' PSL & 2310' PSL Natural Prod. Test: MCF/Day; Hours flowed Choke Size

Tubing, Casing and Cementing Record

Size	Feet	Sax
13 3/8	573	450
9 5/8	3273	1850
7	6953	500

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): 1000 Gala acid

Casing Tubing Date first new Press. Pkr. Press. 650 oil run to tanks May 12, 1959

Oil Transporter Texas New Mexico Pipe Line Co.

Gas Transporter El Paso Natural Gas Co.

Remarks: COR 447/1

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

Approved May 18, 1959

Anderson-Prichard Oil Corp.

(Company or Operator)

OIL CONSERVATION COMMISSION

By: [Signature]

By: [Signature] (Signature)

Title: District Engineer

Send Communications regarding well to:

Title:

Name: L. H. Foster

Address: Box 196, Midland, Texas