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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

I. Operator
CONTINENTAL OIL COMPANY
Address
PO Box 460 HOBBS, NEW MEXICO 88240
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☒
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name **AXI APACHE "D"** Well No. **1** Pool Name, including Formation **BALLARD P.C.** Kind of Lease **INDIAN** **CONTRACT**
State, Federal or Fee **42**
Location
Unit Letter **P** : **900** Feet From The **SOUTH** Line and **1190** Feet From The **EAST**
Line of Section **19** Township **24-N** Range **4-W** , NMPM, **RIO ARRIBA** County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
EL PASO NATURAL GAS CO. **EL PASO, TEXAS**
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When
No

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Date Spudded 5-15-77	Date Compl. Ready to Prod. 6-23-77	Total Depth 2815'	P.B.T.D. 2646'					
Elevations (DF, RKB, RT, GR, etc.) GR 6733'	Name of Producing Formation PICTURED CLIFFS	Top Oil/Gas Pay 2517'	Tubing Depth -					
Perforations 2517 - 2570'	Depth Casing Shoe 2791'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	513'	310 5x.
6 3/4"	2 7/8"	2791'	250 5x.

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Ben A. Lee
(Signature)
ADM. SUPR.
(Title)
2-24-78
(Date)
NMOCB, AZTEC (5) - USGS, DURANGO (2)
EXXON - BEA - FILE

OIL CONSERVATION COMMISSION

APPROVED **FEB 27 1978**, 19
Original Signed by **A. R. Kendrick**
BY
TITLE **SUPERVISOR DIST. 3**

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple completed wells.