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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

Operator CONTINENTAL OIL COMPANY	
Address P.O. BOX 460, HOBBS, N.M. 88240	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner _____

I. DESCRIPTION OF WELL AND LEASE		CONTRACT No. 121	
Lease Name AXI APACHE N	Well No. 14	Pool Name, including Formation BLANCO MV	Kind of Lease INDIAN State, Federal or Fee
Location			
Unit Letter C	8ND	Feet From The NORTH Line and 1850	Feet From The WEST
Line of Section 1	Township 25-N	Range 4-W	NMPM, R20 ARRIBA County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
GAS COMPANY OF NEW MEXICO	DALLAS, TEXAS		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp. Rge.
			NO

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

V. COMPLETION DATA		Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X			X	X					
Date Spudded 6-1-77	Date Compl. Ready to Prod. 7-7-77	Total Depth 6068'		P.B.T.D. 6036'							
Elevations (DF, RKB, RT, GR, etc.) GR 7137'	Name of Producing Formation MESA VERDE		Top Oil/Gas Pay 5777'		Tubing Depth 5930'						
Perforations 5778-5998'		Depth Casing Shoe 6053'									
TUBING, CASING, AND CEMENTING RECORD											
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT					
12 1/4"		8 5/8"		509		160					
7 7/8"		5 1/2"		6053		775					
		2 3/8"		5930							

VI. 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	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
APPROVED AUG 17 1977 OIL CON. COM. DIST. 3			

GAS WELL		Bbls. Condensate/MMCF		Gravity of Condensate	
Actual Prod. Test-MCF/D 1896 CAOF	Length of Test 3 Hrs.				
Testing Method (pitot, back pr.) BP	Tubing Pressure (Shut-in) 1243	Casing Pressure (Shut-in) 1255		Choke Size 3/4"	

VII. 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.

C. L. Kendrick
(Signature)
Mr. Staff Rest
(Title)
8-15-77
(Date)
NMOCC-AZTEC (5) - USGS-DURANGO (2) -
REDA - FILE

OIL CONSERVATION COMMISSION

APPROVED _____, 19____

BY **Original Signed by A. R. Kendrick**

TITLE _____

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 multiply completed wells.