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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

B.K.

Operator Continental Oil Company	
Address Box 460, Hobbs, NM 58240	
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 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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla 28	Lease No.	Well No. 16	Pool Name, including Formation Lindrith Gallup Dakota, West	Kind of Lease Indian Contract No. 66 State, Federal or Fee
Location				
Unit Letter G	1650	Feet From The North	Line and 1650	Feet From The East
Line of Section 34	Township 25-N	Range 4-W	NMCM, Rio Arriba	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Oil Company	Address (Give address to which approved copy of this form is to be sent) Farmington, New Mexico	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) El Paso, Texas	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 34
	Twp. 25	Rge. 4
	Is gas actually connected? <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded 4-23-78	Date Compl. Ready to Prod. 7-27-78	Total Depth 8050	P.B.T.D. 7998					
Elevations (DF, RKB, RT, GR, etc.) 7170 GR	Name of Producing Formation Gallup - Dakota	Top Oil/Gas Pay 6787	Tubing Depth 7813					
Perforations 7762, 65, 67, 76, 95, 98, 7801, 04, 07, 10, 13, 16, 19, 22, 25, 28, 7612, 14, 16, 26, 28, 30, 78, 80, 82, 84, 7720, 22, 24, 6127, 89, 6812, 14, 16, 22, 24, 57, 59, 6912, 18, 38, 40, 42, 44, 64, 66, 68		Depth Casing Shoe 8042						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4	CASING & TUBING SIZE 8 5/8 5 1/2 2 3/8	DEPTH SET 1000 8042 7813	SACKS CEMENT 600 2100					

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 7-29-78	Date of Test <input checked="" type="checkbox"/> 4-5-78	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 Hrs	Tubing Pressure <input checked="" type="checkbox"/> NA	Casing Pressure NA	Choke Size <input checked="" type="checkbox"/> Open
Actual Prod. During Test	Oil - Bbls. <input checked="" type="checkbox"/> 70	Water - Bbls. <input checked="" type="checkbox"/> 47	Gas - MCF <input checked="" type="checkbox"/> 659

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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 H. Lee
(Signature)
Administrative Supervisor
(Title)
9-8-78
(Date)
Mmcc(S) BEA File

OIL CONSERVATION COMMISSION

APPROVED SEP 12 1978, 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.