NE 'E CO OIL CONSERVATION COM? S Santa Fe, New Mexico

REQUEST FOR (OIL) - ALLOWABLE

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 QUADRUPLICATE 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

				Eunice, New Mexico 7-30-56
E ARE F	HEREBY F	REQUESTIN	G AN ALLOWABLE FO	(Place) (Date) PR A WELL KNOWN AS:
Contir	ental	Oil Comp	any Lockhart B	8-13 Awell No. 1-TR : SW 1/ SW 1/
(Co M	mpany or O	perator)	(Lease)	, NMPM, Terry Blinebry Pool
(Cint)	,			
			County. Date Spudded	1-31-53 , Date Completed 4-11-53
Pleas	e indicate	location:		
			Elevation 34271	
			Top oil/sexpay56	541 Name of Prod. Form. Blinebry
			Casing Perforations:	5654-56821, 5722-57681, 5800-58401 or
			Depth to Casing shoe	of Prod. String
			Natural Prod. Test	BOPD
X			based on	bbls. Oil in Hrs. Mins.
	· · ·····		Test after acid or show	t
Casing Size	and Cement Feet	ting Record Sax	Based on	4 bbls. Oil in 6 Hrs. — Mins.
.3 3/8	238	250	Gas Well Potential	## ##
9 5/8		1596	Size choke in inches	24/64
7	7576	720	Date first oil run to ta	anks or gas to Transmission system: 7-15-56
′	7570	730	Transporter taking Oi	il or Gas: Texas-New Mexico Pipe Line Co
marks:			LC 032096 b	Well originally designated as Lockhart
••••		••••	B-13 "A" No 1	A
	***************************************	•••••		12011 711 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
I hereby	y certify th			and complete to the best of my knowledge.
oroved	·····		, 19	Continental Oil Company (Company or Operator)
OII	CONTRI		ÖMMISSION	Part (CCC)
OII	TONSE	CVALION C	OMMISSION	By: (Signature)
	(1.	\mathcal{M} .	Kudel	Title District Superintendent
			Side I	Send Communications regarding well to:
e	••••••••••••	······································	KT-13 _ A),	Name W. E. Allen
				Address Box 68, Eunice, New Mexico