

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

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

Loc: Hebbs, New Mexico Date: Sept. 14, 1957
(Place) (Date)

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

Continental Oil Company (Company or Operator) Sanderson, B-10 Well No. 7 in NW 1/4 NE 1/4,
B Sec. 10, T. 20, R. 36, NMPM, Zement Pool
Lea _____ County. Date Spudded 8-15-57 Date Drilling Completed 8-28-57
Elevation 9611 Total Depth 4,000 PBDT _____
Top Oil/Gas Pay 3780-3913 Name of Prod. Form. Green

Please indicate location:

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

PRODUCING INTERVAL -
Perforations 3780-92, 3796-08, 3828-26, 3838-44, 3846-48, 3868-75, 3882-86,
Open Hole 3898-04, 3907-13 Casing Shoe 3999 Tubing 3994
OIL WELL TEST -
Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____
Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): 51 bbls. oil, _____ bbls water in 24 hrs, 0 min. Size 20/64
GAS WELL TEST -
Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>8 5/8</u>	<u>307</u>	<u>250</u>
<u>5 1/2</u>	<u>4002</u>	<u>370</u>

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): 18,000 gal lease crude 1/8" sand & 1/8" admix per gal.
Casing Tubing Date first new _____
Press. 500 Press. 200 oil run to tanks 9-19-57
Oil Transporter The Atlantic Pipe Line Co.
Gas Transporter Warren Petroleum Corp.

Remarks: _____

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

Approved _____, 19 _____

OIL CONSERVATION COMMISSION

By: [Signature]
Title _____

Continental Oil Company (Company or Operator)
By: [Signature] (Signature)
Title Dist. Chief Clerk
Send Communications regarding well to:
Name Continental Oil Company
Address Box 427, Hebbs, New Mexico