

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
(Revised 7/1/52)

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 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.

Hobbs, New Mexico 12-26-56
(Place) (Date)

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

Continental Oil Company State A-17 Well No. 3, in NE 1/4, Sec. 17, T. 19S, R. 37E, NMPM., Monument & Eumont Pool
(Company or Operator) (Lease)

Unit Letter L, Sec. 17, T. 19S, R. 37E, NMPM., Monument & Eumont Pool

Lea County. Date Spudded Date Completed 12-12-56

Please indicate location:

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

Elevation 3709 Total Depth 4025 P.B.

Seven Rivers, Queen
Type oil/gas pay 3300 Name of Prod. Formed Penrose

Casing Perforations 3300-3305, 3317-3323, 3334-3340, 3370-3395 or
3470-3474, 3480-3492, 3505-3526, 3544-3560,

Depth to Casing shoe of Prod. String 3566-3576, 3580-3590, 3605-3623.

Natural Prod. Test 67 BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot BOPD

Based on bbls. Oil in Hrs. Mins.

Gas Well Potential 19,750 MCFWD on 8 hour back pressure test

Size choke in inches Open

Date first oil run to tanks or gas to Transmission system:

Transporter taking Oil or Gas: El Paso Natural Gas Company

Remarks Dually completed in Grayburg for oil and Seven Rivers, Queen and Penrose for gas.

I hereby certify that the information given above is true and complete to the best of my knowledge.
Approved 20 1957, 19

OIL CONSERVATION COMMISSION

By: E J Kischer

Title

Continental Oil Company
(Company or Operator)
By: [Signature]
(Signature)

Title District Superintendent
Send Communications regarding well to:

Name Continental Oil Company

Address Box 427, Hobbs, N. M.