

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

Eunice, New Mexico October 23, 1962
(Place) (Date)

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

Continental Oil Company Hawk B-3 , Well No. 7 , in 1/4 1/4,
(Company or Operator) (Lease)

Lot Q , Sec. 3 , T. 21S , R. 37E , NMPM, Blinebry Oil Pool
Unit Letter

Lee County. Date Started 10-8-62 Date W/O Completed 10-11-62
W/O Started W/O Completed

Elevation 3475' KB Total Depth 8021 PBD 6886'

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P
<u>LOT Q</u>			

Top Oil/Gas Pay 5745' Name of Prod. Form. Blinebry

PRODUCING INTERVAL -

Perforations 5775-5800', 5845-55', 5890-5900'

Open Hole - Depth - Depth -
Casing Shoe 8014' Tubing 5904'

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke
load oil used): 180 bbls. oil, 0 bbls water in 12 hrs, - min. Size 1/4

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Tubing, Casing and Cementing Record

Size	Feet	Sax
<u>10-3/4</u>	<u>268</u>	<u>250</u>
<u>7-5/8</u>	<u>3128</u>	<u>1145</u>
<u>5-1/2</u>	<u>8014</u>	<u>550</u>
<u>2-7/8</u>	<u>5930</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): 1000 gal 15% acid, 20,000 gal sandfrac, 20,000# sd, 500#
Casing 1000 Tubing 20,000 Date first new 10-13-62
Press. 650 Press. 650 oil run to tanks 10-13-62 Adomite.

Oil Transporter Shell Pipe Line Corp. EFFECTIVE JANUARY 31, 1977,

Gas Transporter (Casinghead) Skelly Oil Company SKELLY OIL COMPANY MERGED INTO GETTY OIL COMPANY.

Remarks: Well plugged back from Wants Abo Pool and recompleted in Blinebry Oil Pool.

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

Approved _____, 19____

OIL CONSERVATION COMMISSION

Continental Oil Company
(Company or Operator)

By: Robert Paul III
(Signature)

Title District Superintendent

Send Communications regarding well to:

Name J. R. Parker

Address Box 68, Eunice, New Mexico

0/3 NOCC WAM FILE

<div style="border: 1px solid black; padding: 2px;">NUMBER OF COPIES RECEIVED</div> <div style="border: 1px solid black; padding: 2px;">DISTRIBUTION</div> <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:50%;">SANTA FE</td><td style="width:50%;"></td></tr><tr><td>FILE</td><td></td></tr><tr><td>U.S.G.S.</td><td></td></tr><tr><td>LAND OFFICE</td><td></td></tr><tr><td>TRANSPORTER</td><td>OIL</td></tr><tr><td></td><td>GAS</td></tr><tr><td>PRODUCTION OFFICE</td><td></td></tr><tr><td>OPERATOR</td><td></td></tr></table>		SANTA FE		FILE		U.S.G.S.		LAND OFFICE		TRANSPORTER	OIL		GAS	PRODUCTION OFFICE		OPERATOR		<div style="border: 1px solid black; padding: 5px;">NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE, NEW MEXICO</div> <div style="border: 1px solid black; padding: 5px; font-weight: bold; font-size: 1.2em;">CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS</div> <div style="border: 1px solid black; padding: 2px; font-weight: bold;">FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE</div>		<div style="border: 1px solid black; padding: 5px;">FORM C-110 (Rev. 7-60)</div>
SANTA FE																				
FILE																				
U.S.G.S.																				
LAND OFFICE																				
TRANSPORTER	OIL																			
	GAS																			
PRODUCTION OFFICE																				
OPERATOR																				
Company or Operator <div style="text-align: center;">Continental Oil Company</div>		Lease <div style="text-align: center;">Hank 3-3</div>	Well No. <div style="text-align: center;">7</div>																	
Unit Letter <div style="text-align: center;">Lot Q</div>	Section <div style="text-align: center;">2</div>	Township <div style="text-align: center;">21-S</div>	Range <div style="text-align: center;">37-E</div>	County <div style="text-align: center;">Lea</div>																
Pool <div style="text-align: center;">Blindbry (Oil)</div>		Kind of Lease (State, Fed, Fee) <div style="text-align: center;">Federal</div>																		
If well produces oil or condensate give location of tanks		Unit Letter <div style="text-align: center;">Q</div>	Section <div style="text-align: center;">3</div>	Township <div style="text-align: center;">21-S</div>	Range <div style="text-align: center;">37-E</div>															
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <div style="text-align: center;">Shell Pipe Line Corp.</div>		Address (give address to which approved copy of this form is to be sent) <div style="text-align: center;">Box 1910, Midland, Texas</div>																		
Is Gas Actually Connected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>																				
Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> <div style="text-align: center;">Skelly Oil Company</div>		Date Connected <div style="text-align: center;">10/15/62</div>	Address (give address to which approved copy of this form is to be sent) <div style="text-align: center;">Box 1135, Dunlap, New Mexico</div>																	
If gas is not being sold, give reasons and also explain its present disposition:																				
REASON(S) FOR FILING (please check proper box)																				
<div style="display: flex; justify-content: space-between;"><div><div>New Well <input type="checkbox"/></div><div>Change in Transporter (check one) Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casing head gas . <input type="checkbox"/> Condensate.. <input type="checkbox"/></div></div><div><div>Change in Ownership <input type="checkbox"/></div><div>Other (explain below) Plugback and Recompletion</div></div></div>																				
Remarks <div style="text-align: center; padding: 10px;">Well plugged back from Santa Fe Pool and recompleted in the Blindbry Oil Pool.</div> <div style="text-align: center;">c/o, NMCC, LRP, SW, FILE</div>																				
The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.																				
Executed this the <u>22nd</u> day of <u>October</u> , 19 <u>62</u>																				
OIL CONSERVATION COMMISSION		By																		
Approved by		Title <div style="text-align: center;">District Superintendent</div>																		
Title		Company <div style="text-align: center;">Continental Oil Company</div>																		
Date		Address <div style="text-align: center;">Box 19, Dunlap, New Mexico</div>																		