	CATRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE FRANCPORTER GAS OPERATOR		ONSERVATION COMM ON FOR ALLOWABLE AND NSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
1.	PROPATION OFFICE			
1	Continental oil Co.			
	P. O. Box 460 Holls Reasons) for tiling (Check proper box) Other (Please explain)			
	Champe in Transperter of: Well redesignation Out Dry Gas Casinethead Gas Condensate Formely Stake 115 No. 3			
	recovery festives.	Onl Dry Gas Casinahead Gas Condens	sate Franch 12	6 115 110 3
	It change of ownership give name	that ail co.		
	DESCRIPTION OF WELL AND I	Well Ho. Pool Nam	ne, Including Formation	Kind of Lease
	Jarolie Syng Pattering	2 Unit 9 Jangle	ie matting for River	State, Federal and to
	Controller P : 66	O Feet From The South Line	e and <u>330</u> Feet From	The East
	Turn to Street 22 , Tow	eship 23-5 Hange 3	6.E , NMPM, Lea	County
ш.	DESIGNATION OF TRANSPORT		S	
	Mirror (Authorized Transporter of Oil		Address (Give address to which appr	
	Tolar mond majoreter of Cas			
	Plilips City un	Unit Con Twp. Age.	Is gas actually connected?	heil Dokace Myton
	mod out a of tank.	0 02 33 36	U	4-19-1960
	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Cit Well Gas Well New Well Workover Deepen Plug Back Same Besty, Diff. Besty,			
	Designate Type of Completio	n = (X)	l l l	
	j (este djinoded	Date Compil. Heady to Fred.	Total Depth	P.B.T.D.
	w !	Mame of Froducing Formation	Top Oil/Gas Pay	Tubing Depth
	erforati no			Depth Casting Shoe
	TUBING, CASING, AND CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			I	
V.	TEST DATA AND REQUEST FOR ALLOWABLE (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)			
	i de Piret New Oil Bun To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
	Length of Test	Tubing Fressure	Casing Pressure	Choke Size
	Artail Fred, During Test	Oil-Bbls.	Water-Bbls.	Gas • MCF
	GAS WELL A contact to the Test-MCE/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	To the Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
VI	. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
	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.		APPROVED, 19	
			BY	
Adm. Lugarniss (Title) 4.24-73			If this is a request for all	wable 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 allow-	
			able on new and recompleted v	ust be filled out completely for allow- vells. II, III, and VI for changes of owner,

NMOCC 5, Partners 5, File

rill 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.