

REQUEST FOR (OIL) - (GAS) ALLOWABLE SEP 11 1957

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.

Hobbs, New Mexico (Place) Sept. 7, 1957 (Date)

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

Continental Oil Company (Company or Operator) State P-4, Well No. 3, in NW 1/4 NE 1/4, B-1, Sec. 4, T. 17, R. 29, NMPM, (Cave) Pool

Eddy County. Date Spudded 8-22-57 Date Drilling Completed 9-2-57

Please indicate location:

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

Elevation Total Depth 2140 PBD

Top Oil/Gas Pay 2388 Name of Prod. Form. Grayburg

PRODUCING INTERVAL -

Perforations 2389-2401 w/ 4 jet shots per ft.

Open Hole Depth Casing Shoe 2439 Tubing 2440

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): 672 bbls. oil, No bbls water in 24 hrs, 0 min. Size 3/4

GAS WELL TEST -

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

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): 500 gal acid 10,000 lbs. crude, Using 1/2 Sand 1/2 Adomite/gal.

Casing Press. 360 Press. 100 oil run to tanks 9-7-57

Oil Transporter Continental Pipe Line Company

Gas Transporter

Remarks:

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

Approved SEP 11 1957, 19

Continental Oil Company  
(Company or Operator)

By: J. P. McCormick  
(Signature)

OIL CONSERVATION COMMISSION

By: M. L. Armstrong  
Title OIL AND GAS INSPECTOR

Title District Chief Clerk  
Send Communications regarding well to:

Name Continental Oil Company

Address Box 427, Hobbs, New Mexico

OIL CONSERVATION COMMISSION		
ARTESIA DISTRICT OFFICE		
No. Copies Received <u>1</u>		
DISTRIBUTION		
	NO. FURNISHED	
Operator		
County Eng		
Engineering Dept		
State Land Office		
U. S. G. S.		
Transportation		
File		<u>1</u>

(File the original and 4 copies with the appropriate district office) SEP 11 1957

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Oil Cons. Comm.  
ARTESIA OFFICE

Company or Operator Continental Oil Company Lease State P-4

Well No. 3 Unit Letter B-S 4 T 17 R 29 Pool Cave Undersig

County Eddy Kind of Lease (State, Fed. or Patented) State

If well produces oil or condensate, give location of tanks: Unit S T R  
NE 4 17 29

Authorized Transporter of Oil or Condensate Continental Pipe Line Company

Address Artesia, New Mexico  
(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Frontier Gasoline Co.

Address Odessa, Texas  
(Give address to which approved copy of this form is to be sent)

If Gas is not being sold, give reasons and also explain its present disposition:

Reasons for Filing: (Please check proper box) New Well (X)

Change in Transporter of (Check One): Oil ( ) Dry Gas ( ) C'head ( ) Condensate ( )

Change in Ownership ( ) Other ( )

Remarks: (Give explanation below)

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 9 day of Sept 19 57

By J. P. McCormick

Approved SEP 11 1957 19

Title District Chief Clerk

OIL CONSERVATION COMMISSION

By M. L. Armstrong

Company Continental Oil Company

Title OIL AND GAS INSPECTOR

Address Box 427, Hobbs, New Mexico

OIL CONSERVATION COMMISSION		
ARTESIA DISTRICT OFFICE		
No. Copies Received		20
DISTRIBUTION		
	RECEIVED	
Transporter		
File		