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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-69

1969

I. Operator  
Continental Oil Company  
Address  
Box 460, Hobbs, New Mexico 88240  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☒ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, including Formation	Kind of Lease
Cave Pool Unit		24	Cave Grayburg	State, Federal or Fee State
Location Unit Letter K ; 1650 Feet From The South Line and 1650 Feet From The West Line of Section 5 Township 17 South Range 29 East , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Navajo Refining Company	North Freeman Avenue, Artesia, New Mexico					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Phillips Petroleum Corporation	Phillips Building, Odessa, Texas					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	5	17	29	Yes	N/A

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion -- (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res't.	Diff. Res't.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DE, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

VI. CERTIFICATE OF COMPLIANCE

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.

M. E. Healy  
Administrative Section Chief  
(Title)

June 3, 1969

(Date)

ENCLOSURE File

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable 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 allowable on new and recompleted wells.

Fill 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 Form C-104 must be filed for each pool in multiply completed wells.

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PRODUCTION OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION  
SANTA FE, NEW MEXICO  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110  
(Rev. 7-60)

P

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Continental Oil Company</b>			Lease <b>Cave Pool Unit</b>		Well No. <b>24</b>
Unit Letter <b>K</b>	Section <b>5</b>	Township <b>17S</b>	Range <b>29E</b>	County <b>Eddy</b>	
Pool <b>Cave</b>			Kind of Lease (State, Fed, Fee) <b>State</b>		
If well produces oil or condensate give location of tanks		Unit Letter <b>J</b>	Section <b>5</b>	Township <b>17S</b>	Range <b>29E</b>
Authorized transporter of oil <input checked="" type="checkbox"/> or condensate <input type="checkbox"/> <b>Continental Pipe Line Company</b>			Address (give address to which approved copy of this form is to be sent) <b>Box 410, Artesia, New Mexico</b>		

Is Gas Actually Connected? Yes ☒ No ☐

Authorized transporter of casing head gas <input checked="" type="checkbox"/> or dry gas <input type="checkbox"/>		Date Connected <b>3-1-62</b>	Address (give address to which approved copy of this form is to be sent) <b>Phillips Bldg., Odessa, Texas</b>
<b>Phillips Petroleum Corp.</b>			

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

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one) Other (explain below) ☒  
 Oil ..... ☒ Dry Gas ..... ☐ Change in oil transporter and  
 Casing head gas ..... ☐ Condensate ..... ☐ battery location, effective  
**12-1-63.**

Remarks

RECEIVED

JAN 10 1964

G. D. E.  
ARTESIA OFFICE

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

Executed this the 30th day of December, 19 63.

OIL CONSERVATION COMMISSION		By
Approved by		Title
<i>M. C. ...</i>		<b>Assistant District Manager</b>
Title		Company
<b>OIL AND GAS ...</b>		<b>Continental Oil Company</b>
Date		Address
<b>JAN 13 1964</b>		<b>Box 460, Hobbs, N. M.</b>

NUMBER OF COPIES RECEIVED	
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LAND OFFICE	
TRANSPORTER	OIL GAS
REGISTRATION OFFICE	
OPERATOR	

**NEW MEXICO OIL CONSERVATION COMMISSION**  
**SANTA FE, NEW MEXICO**  
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION**  
**TO TRANSPORT OIL AND NATURAL GAS**

**FORM C-110**  
 (Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator <b>Continental Oil Company</b>			Lease <b>Cave Pool Unit</b>		Well No. <b>24</b>
Unit Letter <b>K</b>	Section <b>5</b>	Township <b>17S</b>	Range <b>29E</b>	County <b>Eddy</b>	
Pool <b>Cave</b>			Kind of Lease (State, Fed, Fee) <b>State</b>		
If well produces oil or condensate give location of tanks		Unit Letter <b>9</b>	Section <b>5</b>	Township <b>17S</b>	Range <b>29E</b>
Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/>  <b>Texas-New Mexico Pipe Line Company</b>			Address (give address to which approved copy of this form is to be sent)  <b>Box 1434 Midland, Texas</b>		
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"/>		Date Connected <b>3-1-63</b>	Address (give address to which approved copy of this form is to be sent)  <b>Box 1434 Midland, Texas</b>		
If gas is not being sold, give reasons and also explain its present disposition:					

**REASON(S) FOR FILING (please check proper box)**

New Well ..... ☐ Change in Ownership ..... ☐  
 Change in Transporter (check one)  
 Oil ..... ☐ Dry Gas ..... ☐  
 Casing head gas ..... ☐ Condensate ..... ☐  
 Other (explain below)  
**Change in well designation**

**RECEIVED**  
 APR 5 1963  
 OIL & GAS  
 REGISTRATION OFFICE

**Remarks**

This well was formerly Continental Oil Co. well No. 1  
 B-1 Section with the unitization of the Cave Pool Unit it was  
 renumbered Cave Pool Unit No. 24.

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

Executed this the 29th day of April, 1963.

<b>OIL CONSERVATION COMMISSION</b>		By  <b>J. C. Preece</b>
Approved by  <b>William H. Preece</b>		Title <b>Reg. Dist. Superintendent</b>
Title  <b>OIL AND GAS INSPECTOR</b>		Company <b>Continental Oil Company</b>
Date  <b>APR 5 1963</b>		Address <b>Box 1434, Hobbs, New Mexico</b>