HO, OF COPIES HECEIVED 1 5	7		
DISTRIBUTION	- NEW MEXICO OIL C		Form C-104
SANTA FE //	REQUEST	FOR ALLOWABLE	Supersedes Obl C-104 and C-11
U.S.G.S.		AND	展EEPP世世论于一 GAS
IRANSPORTER OIL /		<u>:</u>	JUB 1 1 1939
OPERATOR /			C. C. C.
Continental Oil Company			· · · · · · · · · · · · · · · · · · ·
Address			· · · · · · · · · · · · · · · · · · ·
Box 460, Hobbs, New Me Reason(s) for filing (Check proper to:		Other (Flease explain)	
New Well	Change In Transporter of: Oil X Dry Ga		
Change in Ownership	Casinghead Gas Conder		
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND	LEASE		· · · · · · · · · · · · · · · · · · ·
Lease Name Cave Pool Unit	Lease No. Well No. Pool Na	me, Including Formation Grayburg	Kind of Lease State, Federal or Fee State
Location Unit Letter C . 66	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·			
			dy County
DESIGNATION OF TRANSPOR Nome of Authorized Transporter of Of	TER OF OIL AND NATURAL GA 1 A or Condensate	S Address (Give address to which appr	oved copy of this form is to be sent)
Navajo Refining Compar Name of Authorized Transporter of Ca	ny Isinghead Gas X or Dry Gas	North Freeman Avenue, Address (Give address to which appr	Artesia, New Mexico oved copy of this form is to be sent)
Phillips Petroleum Con	rporation	Phillips Building, Ode	ssa, Texas
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? W Yes	hen N/A
If this production is commingled with COMPLETION DATA	ith that from any other lease or pool,		
Designate Type of Completi	on - (X)	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty,
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!!/Gas Pay	Tubing Depth
Perforations		<u> </u>	Depth Casing Shoe
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		·	
TEST DATA AND REQUEST F		fter recovery of total volume of load of opth or be for full 24 hours)	l and must be equal to or exceed top allow
Date First New Oll Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Sizo
Actual Prod, During Test	Oil-Bbis.	Water-Bbls.	Gas - MCF
GAS WELL Actual Prod. Test-MCF/D	Longth of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Mothod (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choko Sizo
CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conscrvation Commission have been complied with and that the information given		APPROVED	19 <u>61</u> , 19
above is true and complete to th	e best of my knowledge and belief.	BY	X COMic 6
s al l	20	TITLE	compliance with rule r (10)
M. E. Geald	1994	If this is a recusst for ello	compliance with RULE 1104. wable for a newly drilled or deepened anied by a tabulation of the deviation
Administrative Sectior		tests taken on the well in acco	anica by a tabulation of the deglation ordenee with RULE 111. upt be filled out completely for allev-
(T. June 3, 1969	itle)	able on new and recompleted v	relia. II, III, and VI for changes of owner,
and the second	cte)	well name or number, or transpo	tter, or other such change of condition. st be filed for each pool in publicly
MISCOLUT ITTC		completed wells.	

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