

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.

Artesia, New Mexico

May 11, 1959

(Place)

(Date)

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

Continental Oil Company

State U-15

Well No. 2, in NW 1/4 NW 1/4,

(Company or Operator)

(Lease)

D

Sec. 15

T. 17S

R. 29E

NMPM.,

Square Lake

Pool

Unit Letter

Eddy

County. Date Spudded 6-19-58

Date Drilling Completed 6-27-58

Please indicate location:

Elevation 2585

Total Depth 2618 PBD

Top Oil/Gas Pay 2270

Name of Prod. Form. Grayburg

PRODUCING INTERVAL -

Perforations 2350-56, 2378-92, 2403-09, 2448-57

Open Hole Depth Casing Shoe Depth Tubing

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 load oil used): 5 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size Choke Pump

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): 28,000 gals. standard Sandfrac and 1,000 gals. mud acid

Casing Tubing Date first new Press. oil run to tanks 4-20-59

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: May 11, 1959, 19

Continental Oil Company
(Company or Operator)

By: W. C. M. (Signature)

Title District Superintendent

Send Communications regarding well to:

Name Continental Oil Company

Address Rowley Bldg., Artesia, New Mexico

OIL CONSERVATION COMMISSION

By: W. C. M. (Signature)

Title

0-0016-10000-1

1. The first step is to identify the key components of the system. This includes understanding the hardware, software, and data involved.

1. *Journal of the American Medical Association*, 1997; 277: 1033-1038.

Figure 1. The effect of the concentration of the H_2O_2 solution on the amount of the released H_2O_2 from the H_2O_2 -loaded hydrogel. The amount of the released H_2O_2 was measured by the amount of the released H_2O_2 from the H_2O_2 -loaded hydrogel. The amount of the released H_2O_2 was measured by the amount of the released H_2O_2 from the H_2O_2 -loaded hydrogel.

1. *Chlorophyll a* (Chl *a*) and *Chlorophyll b* (Chl *b*) were determined by the method of Arar and Collins (1971) using a Shimadzu 1010 spectrophotometer. The concentration of Chl *a* and Chl *b* was expressed as $\mu\text{g mL}^{-1}$ of the sample.

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NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

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

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Continental Oil Company Lease State U-15

Well No. 2 Unit Letter D S 15 T 173 R 29E Pool Square Lake

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

If well produces oil or condensate, give location of tanks: Unit C S 15 T 17 R 29

Authorized Transporter of Oil or Condensate Continental Pipe Line Company

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

Authorized Transporter of Gas None

Address _____
(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:

Gas being vented to air

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

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 11th day of May 1959

Approved MAY 15 1959 19

OIL CONSERVATION COMMISSION

By W. H. Armstrong
Title Oil and Gas Inspector

By W. G. Mead
Title District Superintendent

Company Continental Oil Company

Address Rowley Bldg., Artesia, N. M.

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