RECEIVEDNEW EXICO OIL CONSERVATION COMM 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.

ed into th	ie stock tan	ks. Gas mus	Artesia, New Mexico 11-17-61
			/ (Place) / (Date)
E ARE F	IEREBY R	EQUESTI:	NG AN ALLOWABLE FOR A WELL KNOWN AS:
(ko	mpany or Op	erator) \	State S-30 Well No. 3 in NW 1/4 SW 1/4,
L /	Sec	30	T. 17-S , R 29-E , NMPM., Empire Abo Pool
Unit La	Her .		
Dian	e indicate		County. Date Spudded 10-22-61 Date Drilling Completed 11-7-61 Elevation Total Depth 6350 PBTD 6345 Top Oil/Gas Pay 6181 Name of Prod. Form. Abo Reef
	e muicate	iocauon:	Top Oil/Gas Pay 6181 Name of Prod. Form. Abo Reef
D	C B	A	PRODUCING INTERVAL -
			Perforations 6270-88, 6298-6311
E	F G	H	Open Hole Depth Casing Shoe 6350 Depth Tubing 6218
			OIL WELL TEST -
į.	KJ	I	Choke Natural Prod. Test:bbls.oil,bbls water inhrs,min. Size
X			Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of
M	N O	P	load oil used): 360 bbls,oil, 5 bbls water in 24 hrs, - min. Size 16/6
			GAS WELL TEST -
980 F	L & 330	FWL	Natural Prod. Test:MCF/Day; Hours flowedChoke Size
bing Cas	ing and Com	enting Recor	
Size	Feet	Sax	Test After Acid or Fracture Treatment:MCF/Day; Hours flowed
0 = /0	215	200	Choke Size Method of Testing:
8 5/8	745	300	
4 1/2	6374	500	Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and
2 3/8	6242		Casing Date Tubing 770 Date first new 73 33 (3
- 7/ 0	0.24		The Permian Corporation (Trucks)
			Gas Transporter Pan American Petroleum Corporation
marks:			
Copies	to: NMC	CC-4 SI	O File
I hereb	y certify th	nat the info	rmation given above is true and complete to the best of my knowledge.
proved		2.01961	Continental Oil Company (Company or Operator)
OI	L CONSE	RVATION	COMMISSION By: (Signature)
.]];	1/1/2	11/3/20	Title District Superintendent
· ···s/isskisfi	ditrbididid.h.	.r.x.x.x.ki.h.h.l	Send Communications regarding well to:
ile <i>su</i>	. I. II B A & - / /	FSPECTO A	Name Continental Oil Company
			Address Rowley Bldg., Artesia, New Mexico
			Address

ARTESIA DISTRICT OFFICE		
Copies Received	4	
DISTRU	n ajki	
	60. Asikanbi (f	
OPERATOR		
SANTA FL	/_	
PROBATION OFFICE	/_	
STATE LAND OFFICE		
U. S. G. S.		
TRANSPORTER		
FILE		
BUREAU OF MINES		

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