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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION 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 1-1-65

RECEIVED

JAN 19 1976

I. Operator  
Continental Oil Company  
Address  
P.O. Box 460 Hobbs NM 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 <u>James Ranch Unit</u>	Well No. <u>7</u>	Pool Name, including Formation <u>Los Medanos Morrow</u>	Kind of Lease State, <u>(Federal)</u> or Fee <u>NM 02887-A</u>	Lease No.
Location Unit Letter <u>G</u> ; <u>1980</u> Feet From The <u>north</u> Line and <u>1980</u> Feet From The <u>EAST</u> Line of Section <u>6</u> Township <u>23-S</u> Range <u>31-E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <u>Permian Corporation</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1183 Houston TX 77001</u>			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>EL PASO NATURAL GAS</u>	Address (Give address to which approved copy of this form is to be sent) <u>600 Bank of the Southwest, Midland TX</u>			
If well produces oil or liquids, give location of tanks.	Unit <u>G</u>	Sec. <u>6</u>	Twp. <u>23</u>	Rge. <u>31</u>
				Is gas actually connected? <u>NO</u>
				When <u>1-19-76</u>

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'tv.	Diff. Res'tv.
					<input checked="" type="checkbox"/>			
Date Spudded <u>1-30-74</u>	Date Comp. Ready to Prod. <u>8-31-75</u>		Total Depth <u>14590</u>		P.B.T.D. <u>14590'</u>			
Elevations (DF, RKB, RT, GR, etc.) <u>3319</u>	Name of Producing Formation <u>MORROW</u>		Top Oil/Gas Pay <u>14062</u>		Tubing Depth <u>13900</u>			
Perforations <u>14168-78, 14234-44</u> <u>14470-14480, 14522-26, 14062-74, 14086-88, 14094-99</u>				Depth Casing Shoe <u>14585</u>				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE <u>17 1/2</u> <u>12 1/4"</u> <u>9 1/2"</u>	CASING & TUBING SIZE <u>13 3/8</u> <u>10 3/4</u> <u>7 7/8</u> <u>5</u>		DEPTH SET <u>630</u> <u>3942</u> <u>11912</u> <u>14590</u>		SACKS CEMENT <u>550</u> <u>650</u> <u>700</u> <u>370</u>			

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

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 TEST will be submitted when back pressure test taken

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

Stephen A Johnson  
(Signature)  
Staff Assistant  
(Title)  
Jan 16, 1976  
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 20 1976

BY W. C. Gressett, 19  
SUPERVISOR, DISTRICT II

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