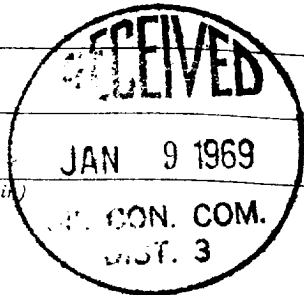


DISTRIBUTION	
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL / GAS /
OPERATOR	/
PRORATION OFFICE	

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-11
Effective 1-1-65

MAIN OFFICE
JAN 8 1969



I.

Operator
Continental Oil Company
Address
200 North Wolcott, Casper, Wyoming 82601

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jicarilla 28	Well No. 6	Pool Name, Including Formation Undesignated Gallup	Kind of Lease Federal
Location Unit Letter D ; 710 Feet From The N Line and 660 Feet From The W Line of Section 33 , Township 25N Range 4W , NMPM, Rio Arriba			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1588, Farmington, New Mexico
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) P.O. Box 990, Farmington, New Mexico
If well produces oil or liquids, give location of tanks. Unit J Sec. 28 Twp. 25N Rge. 4W	Is gas actually connected? Yes When 12-21-68

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Restv. Ent. Restv.
Date Spudded 11-23-68	Date Compl. Ready to Prod. 12-21-68	Total Depth 7606'	P.B.T.D. 7510'				
Pool Undesignated Gallup	Name of Producing Formation Gallup	Top Oil/Gas Pay 6368'	Tubing Depth 7222'				
Perforations 1 hole/ft. 6366-70, 6376-80, 6400-10, 6430-32, and 6551-68	Depth Casing Shoe 7606'						
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8"	DEPTH SET 242'	SACKS CEMENT 165				
7 7/8"	5 1/2"	7606'	770				
	2 3/8"	7222'					

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 12-21-68	Date of Test 1-2-69	Producing Method (Flow, pump, gas lift, etc.) Plunger Lift	
Length of Test 24 hrs.	Tubing Pressure 1235	Casing Pressure 95	Choke Size 1"
Actual Prod. During Test	Oil-Bbls. 23	Water-Bbls. -	Gas-MCF 52

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

NMOCC-Santa Fe (2) ✓
NMOCC-Aztec (2)
File
ORIGINAL SIGNED BY
J. A. DUBAN
(Signature)
Division Administrative Section Chief
(Title)
January 6, 1969
(Date)

OIL CONSERVATION COMMISSION
JAN 9 1969
APPROVED _____, 19____
BY Original Signed by Emery C. Arnold
TITLE SUPERVISOR DIST. #3
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 Sections I, II, III, and VI only 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.