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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-105
Effective 1-1-65

I. Operator
Continental Oil Company
Address
152 No. Durbin, Casper, Wyoming 82601
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 Jicarilla 22	Well No. 5	Pool Name, Including Formation Undesignated Gallup Undesignated Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. 65
Location Unit Letter L ; 1870 Feet From The South Line and 790 Feet From The West Line of Section 22 Township 25N Range 4W , NMPM, Rio Arriba County				

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 Company	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?		When 11-2-71		

If this production is commingled with that from any other lease or pool, give commingling order number: R-4071

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 Res'v.	Diff. Res'v.
Date Spudded 9-23-71	Date Compl. Ready to Prod. 11-2-71		Total Depth 7820'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) RB	Name of Producing Formation Gallup & Dakota		Top Oil/Gas Pay 6685' - Gallup 7558' - Dakota		Tubing Depth 7531'			
Perforations Dakota 7763-69, 7740-54, 7734-36, 7715-18, 7704-10, 7584-89, 7568-72, 7562-64 w/1 shot/ft. Gallup 6759-72, 6729-34 w/1 shot/ft.					Depth Casing Shoe 7820'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		239'		150			
7 7/8"	4 1/2"		7820'		975			
	2 3/8"		7531'					

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)

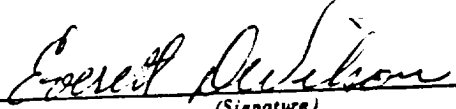
Date First New Oil Run To Tanks 10-22-71	Date of Test 11-2-71	Producing Method (Flow, pump, gas lift, etc.) Pumping Gallup & Dakota Commingled	
Length of Test 24 Hours	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test 29	Oil-Bbls. 15	Water-Bbls. 14 Bbls. Load Water	Gas-MCF 71

Allowable Requested: 50 BOPD - commingling approved Case No. 4462,
GAS WELL Order No. R-4071, Dated 11-18-70

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.


(Signature)
Administrative Supervisor
(Title)
January 24, 1972
(Date)

OIL CONSERVATION COMMISSION
FEB 2 1972, 19
APPROVED
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 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.