| | | | | 1. | |
|---------------------------------|--|--|---|--|--|
| ſ | NO. OF COPIES RECEIVED 5 | 1 | .1 | | |
| t | DISTRIBUTION | NEW MEXICO OIL CO | NSERVATION COMMISSION | Form C-104 | |
| - | SANTA FE / | | OR ALLOWABLE | Effective 1-1-65 | |
| Ī | FILE / C | - | AND . | The State of the S | |
| [| U.S.G.S. | AUTHORIZATION TO TRAN | ISPORT OIL AND NATURAL G | | |
| | LAND OFFICE | | | FEB 2 0/2 | |
| | TRANSPORTER GAS / | | F 6.1. | OFF COM COM | |
| | OPERATOR / | | , 10 | D(31, 3 | |
| 1. | Operator 1 011 | Comment | | | |
| Continental Oil Company | | | | | |
| | 152 No. Durbin, Casper, Wyoming 82601 Other (Please explain) | | | | |
| | Reason(s) for filing (Check proper box | Change in Transporter of: | Omer (1 teese captain) | | |
| | New Well A | Oil Dry Gas | | | |
| | Change in Ownership | Casinghead Gas Condens | sate | | |
| | C.L.I.G. III O.L.II. | | | | |
| | If change of ownership give name and address of previous owner | | e e e e e e e e e e e e e e e e e e e | | |
| II. | DESCRIPTION OF WELL AND | LEASE Well No. Pool Name, Including Fo | rmation Kind of Lease | Lease No. | |
| | Lease Name | Undesignated G | Sallup State Federal | - 1 1 4 | |
| | Jicarilla 28 | 10 Undesignated I |)akota | | |
| | Unit Letter L ; 194 | O Feet From The South Line | and 860 Feet From T | he West | |
| | Line of Section 28 To | wnship 25N Range | 4W , NMPM, | Rio Arriba County | |
| | | and the state of t | 2 | | |
| III. | DESIGNATION OF TRANSPOR | TER OF OIL AND NATURAL GAS | Address (Give address to which approv | ed copy of this form is to be sent) | |
| | P.O. Boy 1588 Farmington New Mexico | | | | |
| | Name of Authorized Transporter of Co | singhead Gas 💟 or Dry Gas 🗔 | Address (Give address to which approv | ed copy of this form is to be sent) | |
| | El Paso Natural Gas | | P.O. Box 990. Farming | | |
| | If well produces oil or liquids, | Unit Sec. Twp. Age. | Is gas actually connected? Whe | | |
| | give location of tanks. | J 28 25N 4W | Yes | 11-7-71 | |
| | If this production is commingled w | ith that from any other lease or pool, | give commingling order number: | R-4071 | |
| IV. | COMPLETION DATA | Oil Well Gas Well | New Well Workover Deepen | Plug Back Same Resty. Diff. Resty. | |
| | Designate Type of Completi | on $-(X)$ | X | | |
| | Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | |
| | 10-8-71 | 12-13-71 | 7700' | 7668 Tubing Depth | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay 6573' Gallup 7432' Dakota | 7402 ' | |
| | RB | Gallup & Dakota | abot per foot Dakota | Depth Casing Shoe | |
| | Perforations Gallup 6646-5 | 1, 6638-42, 6609-19, w/1 -7602, 7470-80, 7449-57, | 7434-40 w/1 shot/ft. | 7700 | |
| TUBING, CASING, AND CEMENTING R | | | CEMENTING RECORD | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| | 12 1/4" | 8 5/8" | 2401 | 150 | |
| | 7 7/8" | 4 1/2" | 7700 ° 7402 ° | 985 | |
| | | 2 3/8" | 7402 | | |
| 4,7 | TEST DATA AND REQUEST 1 | FOR ALLOWABLE (Test must be a) | fter recovery of total volume of load oil | and must be equal to or exceed top allou | |
| ٧ | OIL WELL | OH. WELL | | | |
| | Date First New Oil Run To Tanks | Date of Test | 1 | | |
| | 11-6-71 | 12-13-71 Tubing Pressure | Pumping Gallup & Dakota | Choke Size | |
| | Length of Test 24 Hours | I don't Pressure | | | |
| | Actual Prod. During Test | Oil-Bble. | Water-Bbls. | Gas-MCF | |
| | 111 | 40 | 65 Bbls. Load Water | | |
| | Allowable Requested: 50 BOPD - commingling approved Case No. 4462, | | | | |
| | GAS WELL Order No. | R-4071 Dated 11-18-70 Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate | |
| | Actual Prod. Test-MCF/D | Length of leat | | | |
| | Testing Method (pitot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (Shut-in) | Choke Size | |
| | | | | | |
| VI | L CERTIFICATE OF COMPLIANCE | | OIL CONSERVATION COMMISSION | | |
| • | 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. | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

(Title) January 24, 1972 (Date)

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Administrative Supervisor

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 silow-able 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.