. OF COFIES HEES	IND	1	-
DISTRIBUTIO	5N		
ALV EE			
_E			
3.G.S.			
AND OFFICE			
RANSPORTER	OIL GAS		
PERATOR			

DISTRIBUTION ATA FE LE S.G.S. AND OFFICE RANSPORTER OIL GAS PERATOR RORATION OFFICE		DUSERVATION COMMISSIC FOR ALLOWABLE AND AND BES OFFICE O.C.C NSPORT OIL AND NATURAL O JUN 11 8 49 AM '69	Form C-164 Supersedes Old C-104 and C-116 Effective 1-1-65 GAS
Continental Oil Company			
Box 460, Hobbs, New Mexicoson(s) for filing (Check proper box) dew Well Recompletion Change In Ownership	Change in Transporter of: Oil X Dry Ga Casinghead Gas Conden		•
f change of ownership give name			,
DESCRIPTION OF WELL AND I	JEASE	,	I Kind of Loops
Lease Name / Baish A	Lease No. Well No. Pool No.	ne, Including Formation n Yates	Kind of Lease State, Federal or Fee Federal
Location			
Unit Letter H ; 2310	Feet From The North Lin	e and 990 Feet From	The East
	nship 17 South Range	32 East , NMPM, Lea	County
Name of Authorized Transporter of Oil Navajo Refining Company Name of Authorized Transporter of Cas Continental Oil Compan If well produces oil or liquids, give location of tanks. If this production is commingled with	ingherd Gas \ or Dry Gas \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Maljamar, New Mexico Is gas actually connected? Yes	
IV. COMPLETION DATA	Oil Well Gas Well	New Weil Workover Deepen	Plug Back Same Ros'v. Diff. Res'v
Designate Type of Completic	n = (X)		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay Tubing Depth	
Perforations			Depth Casing Shoe
	THOMAC CASING AM	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V. TEST DATA AND REQUEST FOR WELL Date First New Oil Run To Tanks	OR ALLOWABLE (Test must be able for this d	after recovery of total volume of load o epth or be for full 24 hours) Producing Method (Flow, pump, gas	il and must be equal to or exceed top allow
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Lingth of Tool		Distant Dhia	Gas-MCF
Actual Prod. During Tost	Oil-Bbls.	Water - Bbis.	
	<u> </u>		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate

GAS WELL		Gravity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity or Concensute
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size
TOTAL OF COMPLYANCE		OIL CONSERVATION COMMISSION	

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.

m. S. hockles	
Administrative Section thief (Tule)	
June 3, 1959 (Date)	

This form is to be filed in compliance with RULE 1104.

No gia

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 allows 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.

NHOCC(5) File