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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> 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

I. Operator Conoco Inc.  
Address P.O. Box 460, Hobbs, New Mexico 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) Change of corporate name from Continental Oil Company effective July 1, 1979.

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>MCA Unit</u>	Well No., Pool Name, Including Formation <u>Buty 3 39 Palmar J. Sa</u>	Kind of Lease State, Federal or Fee	Lease No. <u>LC-0295091</u>
Location Unit Letter <u>F</u> <u>1980</u> Feet From The <u>N</u> Line and <u>1980</u> Feet From The <u>W</u> Line of Section <u>22</u> Township <u>17S</u> Range <u>32E</u> , NMPM, <u>Lea</u> County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected?	When

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't.	Diff. Res't.
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		
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		

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	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

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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]  
(Signature)

Division Manager

(Title)

JUN 5 1979

(Date)

NMOCD (5) USGS (2) Partners File

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY [Signature]  
TITLE District 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 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

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JUN 6 1979

OIL CONSERVATION COMM.  
MOORE, N. M.



**LTR**



**Job separation sheet**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
(Other instructions on  
verse side)

Form approved,  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC 029509 (b)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ WATER INJECTION WELL

2. NAME OF OPERATOR  
Continental Oil Company

3. ADDRESS OF OPERATOR  
Box 460, Hobbs, N.M. 88240

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

1980' FNL + 1980' FWL of Sec 22

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

3995'

7. UNIT AGREEMENT NAME

MCA Unit

8. FARM OR LEASE NAME

MCA Unit

9. WELL NO.

39

10. FIELD AND POOL, OR WILDCAT

MAL G-SA REPRESS

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec 22 T-17S R-32E

12. COUNTY OR PARISH

LEA

13. STATE

N.M.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT ☒

(NOTE: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

WORK DONE: CIRC & CLEANOUT ON 3563'-4090'. SET LYNES  
PERMANENT BP AT 3370'. DUMPED 1505 GALS PEA GRAVEL & 35 GALS  
20/40 SAND FOLLOWED BY 170 GALS PEA GRAVEL. TOP OF PEA GRAVEL  
AT 3634'. SET 4-1/2" LINER AT 3674'. TOL AT 3352'. SET 7"  
RETAINER AT 3337'. CMT LINER W/100 SKS CLASS "C" CMT. MP-  
1300#. DRILL OUT RETAINER & CMT 3340' TO 3352'. DRILL OUT TOP  
OF LINER. TEST TOL TO 1500# - OK. SET RETAINER AT 3627'.  
SQUEEZE BDM OF LINER W/75 SKS CLASS "C" CMT. AIR-1/4 BDM.  
AIR-1900#. REVERSE OUT 50 SKS CMT. DRILL OUT RETAINER & CMT  
3615'-3673'. CO PEA GRAVEL 3634'-4090'. TAN TENSION SKP ON  
114 JTS 2-3/8" CMT LINED TEG.

18. I hereby certify that the foregoing is true and correct.

SIGNED

Wm. A. Hunter

TITLE

ADMIN. SUPV.

DATE

5-18-77

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

DATE

MAY 20 1977

U. S. GEOLOGICAL SURVEY  
HOBBS, NEW MEXICO

\*See Instructions on Reverse Side

USGS(5), MCA(4) File

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11/24/67

U.S. AIR FORCE