DISTRIBUTION SANTA FE FILE		L CONSERVATION COMMISSION ST FOR ALLOWABLE AND	Form C -164 Supersedes Old C-104 and C-11 Effective 1-1-65	
U.S.G.S. LAND OFFICE TRANSPORTER GAS OPERATOR	AUTHORIZATION TO 1	RANSPORT OIL AND NATURAL	- GAS	
PRORATION OFFICE Operator				
Continental Oil Co	mpany			
P. O. Box 460, Hols Reason(s) for filing (Check proper	bs, New Mexico 88240	Other (Please explain)		
New Well	Change in Transporter of: Oil Dry		dual pipeline connection ctive 6-1-70	
If change of ownership give nar and address of previous owner.	ne			
DESCRIPTION OF WELL A				
Lease Name MCA UNIT BATTERY 2 Location	/17 Malj	Name, Including Formation . G-SA Repress.	Kind of Lease State, Federal or Fee Federal	
Unit Letter;;	663 Feet From The NORTH	Line and 1980 Feet Fro		
Line of Section 28	Township 17 Range	32, NMPM,	Leng County	
DESIGNATION OF TRANSP	ORTER OF OIL AND NATURAL		proved copy of this form is to be sent)	
Texas-New Mexico Pipe None of Authorized Transporter o	line Company		id, <u>Texas</u> proved copy of this form is to be seut)	
Continental Oil Co. M	aljamar Plant No, 60	P. O. Box 2197, Housto	n <u>, Texas</u>	
If well produces oil or liquids, give location of tanks,	Unit Sec. Twp. Rge. D 28 17 32		When NA	
If this production is commingled COMPLETION DATA	I with that from any other lease or poo	ol, give commingling order number:		
Designate Type of Compl	etion - (X)	New Well Workover Deepen	Plug Back   Same Res'v, Diff. Res'v,	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, et	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations	<u> </u>	<u></u>	Depth Casing Shoe	
	TUBING, CASING, A	ND CEMENTING RECORD		
HOLE SIZE	CASING & TUEING SIZE	DEPTH SET	SACKS CEMENT	
TEST DATA AND REQUEST	L		il and must be equal to or exceed top allow-	
OIL WELL Date First New Oil Run To Tanks	able for this	depth or be for full 24 hours) Producing Method (Flow, pump, gas		
Length of Test	Tubing Pressure	- Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls,	Water-Bbls.	Gas-MOF	
······				
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	
CERTIFICATE OF COMPLE	ANCE	OIL CONSERV	ATION 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.		APPROVED JUN 171970, 19 BY Contents Off & Gas Insperse		
O. A	l'ia	This form is to be filed in	n compliance with RULE 1164.	
Administrative Section (Signature)		well, this form must be accom	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 wall is secondance with RULE 111.	
Administrative Section Chief (Tule)		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow- able on new and recompleted wells.		
6-12-70 (Date)		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.		
NMOCC (5) MCA PARTH	• •	13	ust be filed for each pool in multiply	

MCA PARTNERS FILE (5)

## RECEIVED

JUN 1 G 1970 OIL CONSERVATION COLIM. Hobbs, N. M.

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