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DISTRIBUTION		CONSERVATION COMMISSION	Form C-104
SANTA FE	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-1		
FILE U.S.G.S.		AND AND NATURA	
LAND OFFICE			LGAS
TRANSPORTER OIL GAS	FEB 2	4 12 46 PH '65	
OPERATOR			
PRORATION OFFICE			
Continental	011 Company		
Address (S. S. S			
Reason(s) for filing (Check proper	), dobba, New Mexico	Other (Please explain)	Pearmali A Mo. 4 was
Dew Well	Change in Transporter of:	temporarily	plugged and abandoned
Hecompletion	Cil Dry Go	The second states	formerly producing fro
Change in Ownership	Casinghead Gas Conde	nsate	
If change of ownership give nam and address of previous owner			
I. DESCRIPTION OF WELL AN			
Lease Name Pesreall A		me, Including Formation	Kind of Lease <b>Foderal</b> State, Federal or Fee
Location. Unit Letter	130 Feet From The Horth Lin	le and Feet Pro	
20			ми тис — — — — — — — — — — — — — — — — — — —
Line of Section	Township	, NMPM,	County
I. DESIGNATION OF TRANSPO Name of Authorized Transporter of Texas New Maxico			proved copy of this form is to be sent)
	Casinghead Gas or Dry Gas	Address (Give address to which ap	proved 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,		
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	
Designate Type of Comple	etion $-(X)$		Plug Back Same Res'v, Diff. Res'v.
Date Spudded ODIN LE LOG	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
3-10-62	2-1-02	,436	34051
Pearsall Queen Poo	Name of Producting Formation	Top Oil/Gas Pay	Tubing Depth
Perforations		3276	Depth Casing Shoe
water aine Skit,	3205, 3300, 3311 & 331	-	4 1/2 # 5,08
HOLE SIZE	CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT
13 3/4		110	Cat cire
	3 5/3"	4:5,00'	Cat elro.
63/4	4 1/2	2008	#/575 #x cot
	2 3/3"	Silos	
/. TEST DATA AND REQUEST OIL WELL		fter recovery of total volume of load ( pth or be for full 24 hours)	oil and must be equal to or exceed top allow-
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	s lift, etc.)
2-7-65 Length of Test	2-1-05 Tubing Pressure	Casing Pressure	Choke Size
24 hours		and and	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
4 80		<u> </u>	4. ja mcropd
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 COMPLIA			
			VATION COMMISSION
Commission have been complied	nd regulations of the Oil Conservation d with and that the information given the best of my knowledge and belief.		, I9
above is true and complete to	the best of my knowledge and belief.	8Y	
SIGNED: ROBER	T GAULT III		n compliance with RULE 1104.
		If this is a request for al	lowable for a newly drilled or deepened apanied by a tabulation of the deviation
Staff Superviso ( <sup>Signature</sup> )		tests taken or the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-	
<b>2-23-05</b> (Title)		able on new and recompleted	wells.
	(Date)		III, and VI only for changes of owner, orter, or other such change of condition.
USOS-5, NKOCC-2	JM.	Separate Forms C-104 m completed wells.	ust be filed for each pool in multiply