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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	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
Continental Oil Company
Address
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)
Converted to producing by installing Pumping Equip

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name *MCA Unit* Well No. *96* Pool Name, Including Formation *GRAYBURG SAN ANDRES* Kind of Lease *Federal* Lease No. *LC029405(6)*
Location
Unit Letter *N* : *25* Feet From The *South* Line and *2390* Feet From The *WEST*
Line of Section *20* Township *17S* Range *32E* , NMPM, *Lea* County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Navajo Refining Company Address (Give address to which approved copy of this form is to be sent)
North Greenway Ave. Artesia N.M.
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Continental Oil Company Address (Give address to which approved copy of this form is to be sent)
McJannet, New Mexico
If well produces oil or liquids, give location of tanks. Unit *A* Sec. *30* Twp. *17* Rge. *32* Is gas actually connected? *Yes* When *N/A*

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover <input checked="" type="checkbox"/>	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
<i>10-15-48</i>	<i>8-8-69</i>		<i>4048'</i>					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
<i>3974' DF</i>	<i>GRAYBURG SAN ANDRES</i>		<i>3752'</i>		<i>4038'</i>			
Perforations					Depth Casing Shoe			
<i>3752'-3722' NITRO</i>								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<i>15"</i>	<i>10 3/4"</i>	<i>60'</i>	<i>50</i>
<i>7 7/8"</i>	<i>5 1/2"</i>	<i>3653'</i>	<i>250</i>

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.)	
<i>8-13-69</i>	<i>8-15-69</i>	<i>Pumping</i>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
<i>24 hrs.</i>			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	<i>44</i>	<i>6</i>	<i>53</i>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

M. E. Heasley
(Signature)
Administrative Section Chief
(Title)
8-27-69
(Date)

OIL CONSERVATION COMMISSION

APPROVED *SEP 4 1969*, 19
BY *John W. Runyan*
TITLE *Geologist*

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 completed wells.