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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
Reason(s) for filing (Check proper box) Other (Please explain)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐ Name change

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
<u>MCA Unit Bty 1</u>		<u>291</u>	<u>Maljamar G-SA Reservoir</u>	<u>LC 029405(6)</u>
State, <u>Federal</u> or Fee				
Location				
Unit Letter	<u>L</u>	<u>1345</u>	Feet From The <u>South</u> Line and <u>1295</u>	Feet From The <u>West</u>
Line of Section	<u>19</u>	Township <u>17S</u>	Range <u>32E</u>	NMPM, <u>Yea</u> County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<u>Navajo Pipeline Company</u>	<u>No. Freeman Ave Artesia, N. Mex</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<u>Continental Maljamar Gas Plant #60</u>	<u>Box 1206 Maljamar, N. Mex</u>	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	<u>A</u>	<u>30</u>
	Twp.	Rge.
	<u>17S</u>	<u>32E</u>
Is gas actually connected?	When	
<u>yes</u>	<u>N/A</u>	

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 <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	<u>7-28-71</u>	Date Compl. Ready to Prod.	<u>8-13-71</u>	Total Depth	<u>4070'</u>	P.B.T.D.	<u>4031'</u>	
Elevations (DF, RKB, RT, GR, etc.)	<u>3921' gr</u>	Name of Producing Formation	<u>Artesia San Andres</u>	Top Oil/Gas Pay	<u>3562'</u>	Tubing Depth	<u>3993'</u>	
Perforations	<u>3928', 32', 41', 47', 30563', 66', 69', 74', 82', 85', 88', 91', 3690', 93', 96', 99', 3871', 75', 3881'</u>			Depth Casing Shoe	<u>4070'</u>			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
<u>12 1/4"</u>	<u>8 1/2"</u>	<u>700'</u>	<u>400 SKS - Circ</u>					
<u>7 7/8"</u>	<u>5 1/2"</u>	<u>4070'</u>	<u>300 SKS</u>					
	<u>2 3/8" sty</u>	<u>3993'</u>						

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	<u>8-13-71</u>	Date of Test	<u>8-18-71</u>	Producing Method (Flow, pump, gas lift, etc.)	<u>Pumping</u>
Length of Test	<u>24 hrs</u>	Tubing Pressure	<u>---</u>	Casing Pressure	<u>---</u>
Actual Prod. During Test		Oil-Bbls.	<u>305</u>	Water-Bbls.	<u>128</u>
				Gas-MCF	<u>---</u>

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure	Casing Pressure	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)
Administrative Supervisor
(Title)
August 20, 1971
(Date)

NMOCC(5) USGS(2) MCA(3) File

OIL CONSERVATION COMMISSION
AUG 23 1971
APPROVED _____, 19____
BY [Signature]
TITLE SUPERVISOR DISTRICT I

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.

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AUG 23 1971

OIL CONSERVATION COMM.
HOUSTON, TX. TX.

CONTINENTAL OIL COMPANY

P. O. Box 460
Hobbs, New Mexico

August 29, 1971

New Mexico Oil Conservation Commission
P. O. Box 1980
Hobbs, New Mexico 88240

Gentlemen:

In compliance with New Mexico Oil Conservation Commission Rule III, we are submitting below a list of deviation surveys taken on Continental Oil Company's MCA Unit Bay 1 No. 221, located Unit L Section 19, Lea County, New Mexico.

DEPTH	DEGREE	DEPTH	DEGREE	DEPTH	DEGREE
<u>470'</u>	<u>$\frac{1}{4}^{\circ}$</u>	<u>3728'</u>	<u>$\frac{3}{4}^{\circ}$</u>	_____	_____
<u>700'</u>	<u>$\frac{1}{2}^{\circ}$</u>	_____	_____	_____	_____
<u>945'</u>	<u>$\frac{1}{2}^{\circ}$</u>	_____	_____	_____	_____
<u>1190'</u>	<u>$\frac{1}{2}^{\circ}$</u>	_____	_____	_____	_____
<u>1445'</u>	<u>$\frac{3}{4}^{\circ}$</u>	_____	_____	_____	_____
<u>1668'</u>	<u>1°</u>	_____	_____	_____	_____
<u>1889'</u>	<u>$1\frac{1}{4}^{\circ}$</u>	_____	_____	_____	_____
<u>2109'</u>	<u>$1\frac{1}{2}^{\circ}$</u>	_____	_____	_____	_____
<u>2264'</u>	<u>$1\frac{1}{4}^{\circ}$</u>	_____	_____	_____	_____
<u>2797'</u>	<u>$1\frac{1}{2}^{\circ}$</u>	_____	_____	_____	_____
<u>3270'</u>	<u>$1\frac{1}{4}^{\circ}$</u>	_____	_____	_____	_____

Yours very truly,

Subscribed and sworn to before me, a Notary Public, in and for Lea County, New Mexico, this 20th day of August, 1971.

2-20-73
My Commission Expires

W. H. Hoover
Notary Public