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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION 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.

Continental Oil Company	
Address: Box 460 Hobbs, New Mexico	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain) Change in lease name	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
MCA Unit Bty 2	324	Maly' G-SA Repress	State, (Federal) or Fee	LC-057210
Location				
Well Letter	L	1345 Feet from The	South	Line and 25 Feet From The West
Line of Section	28	Township	17S	Range 32E, NMFM, Lea 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)	
Texas New Mexico Pipeline Co.	Box 1510 Midland, Texas	
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)	
Continental Oil Co. Gasoline Plant #60	Box 2197, Houston, Texas	
Does it produce oil or liquids, specify location of tanks.	Unit	Sec.
	D	28 17S 32E
		400
		When N/A

If this production is commingled with that from any other lease or pool, give commingling order number: N/A

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'tv. <input type="checkbox"/>	Diff. Res'tv. <input type="checkbox"/>
Date Spudded	9-28-72	Date Comp. Ready to Prod.	10-18-72	Total Depth	4170'	P.B.T.D.	4127'	
Depth of Well, RKB, RT, GR, etc.,	3945' gr	Name of Producing Formation	Shawburg Sand	Top Oil/Gas Pay	3828'	Tubing Depth	3968'	
Formations	3830', 36', 45', 3847', 3253', 3881', 3919', 22', 25', 35', 84', 92', 97', 99', 4020', 23', 4030', 4058', 61', 71', 75', 4081'			Depth Casing Shoe	4170'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	881'	Circ - 500 sacks					
7 7/8"	5 1/2"	4170'	300 sacks					
	2 1/2" + dg	3968'						

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	10-18-72	Date of Test	10-23-72	Producing Method (Flow, pump, gas lift, etc.)	Pump
Length of Test	24 hrs	Tubing Pressure		Casing Pressure	
Actual Prod. During Test		Oil-Bbls.	329	Water-Bbls.	195
				Gas-MCF	1

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. L...
(Signature)
Administrative Supervisor
(Title)
October 25, 1972
(Date)

USGS-2 MCA-3

OIL CONSERVATION COMMISSION

APPROVED: _____, 19____
BY: _____
TITLE: _____

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.

October 25, 1972

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 Battery # 2 No. 324, located in Unit L Section 28, Lea County, New Mexico.

DEPTH	DEGREE	DEPTH	DEGREE	DEPTH	DEGREE
<u>249'</u>	<u>$\frac{1}{4}^{\circ}$</u>	<u>3029'</u>	<u>$1\frac{3}{4}^{\circ}$</u>	_____	_____
<u>489'</u>	<u>$\frac{1}{4}^{\circ}$</u>	<u>3201'</u>	<u>2°</u>	_____	_____
<u>701'</u>	<u>$\frac{1}{2}^{\circ}$</u>	<u>3500'</u>	<u>2°</u>	_____	_____
<u>889'</u>	<u>$\frac{1}{2}^{\circ}$</u>	<u>3950'</u>	<u>$1\frac{3}{4}^{\circ}$</u>	_____	_____
<u>1113'</u>	<u>$\frac{1}{2}^{\circ}$</u>	<u>4170'</u>	<u>$1\frac{3}{4}^{\circ}$</u>	_____	_____
<u>1363'</u>	<u>$\frac{1}{2}^{\circ}$</u>	_____	_____	_____	_____
<u>1582'</u>	<u>$\frac{3}{4}^{\circ}$</u>	_____	_____	_____	_____
<u>1835'</u>	<u>$\frac{3}{4}^{\circ}$</u>	_____	_____	_____	_____
<u>2086'</u>	<u>1°</u>	_____	_____	_____	_____
<u>2210'</u>	<u>1°</u>	_____	_____	_____	_____
<u>2530'</u>	<u>$1\frac{1}{2}^{\circ}$</u>	_____	_____	_____	_____

Yours very truly,

M. E. MacFarley

Subscribe and sworn to before me, a Notary Public, in and for Lea County, New Mexico, this 25th day of October, 1972.

2-20-73
My Commission Expires

W. M. Hoover
Notary Public



LTR



Job separation sheet

UNIT STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE
(Other instructions on
reverse side)

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

LC-057210

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME MCA	
2. NAME OF OPERATOR Continental Oil Co.		8. FARM OR LEASE NAME MCA Unit #2	
3. ADDRESS OF OPERATOR Box 460 Hobbs, N. Mex		9. WELL NO. 324	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface: 1345' FSL and 25' FWL of Sec 28		10. FIELD AND POOL, OR WILDCAT Maj' G-SA Repress	
14. PERMIT NO.		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA Sec 28, T-17S, R-32E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3945' gr		12. COUNTY OR PARISH Dea	
		13. STATE N. Mex	

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input checked="" type="checkbox"/> Setting prod string	

(NOTE: Report results of multiple completion or 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.) *

Set 5 1/2" 14# casing at 4170'. Cemented w/ 300 sacks class C cement, TOC @ 2250'. PBD @ 4127'.

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

SIGNED

M E Yeakley

TITLE

Admin. Supervisor

DATE

10-25-72

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

OCT 27 1972

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

*See Instructions on Reverse Side

USGS(5) MCA(3) File