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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-111
Effective 1-1-65

I. OPERATOR

Operator Continental Oil Company

Address Box 460 Hobbs N M, 80240

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 ☐ Change in lease name

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>MCA Unit Battery 3</u>	Well No. <u>345</u>	Pool Name, including Formation <u>Maj GSA Reservoir</u>	Kind of Lease <u>LC-0295096</u>	Lease No.
Location				
Unit Letter <u>J</u>	<u>2515</u> Feet From The <u>South</u> Line and <u>1345</u> Feet From The <u>East</u>			
Line of Section <u>22</u>	Township <u>T-17-S</u>	Range <u>R-32 E</u>	NMPM, <u>Lee</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>Jefferson-Mexican Pipeline</u>	<u>Box 1510, Midland, Texas</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 Oil Co., Midland Pipeline Res #60</u>	<u>Box 2197, Houston, Texas</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<u>C</u> <u>27</u> <u>17</u> <u>32</u>	<u>yes</u> <u>10-4-73</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 <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded <u>8-29-73</u>	Date Compl. Ready to Prod. <u>10-4-73</u>	Total Depth <u>4150</u>	P.B.T.D. <u>4070</u>					
Elevations (DF, RKB, RT, GR, etc.) <u>3994 GR</u>	Name of Producing Formation <u>Maj GSA Reservoir</u>	Top Oil/Gas Pay <u>3780</u>	Tubing Depth <u>4150</u>					
Perforations <u>4036, 34, 32, 3979, 3977, 3975, 3810, 08, 05, 3785, 3782,</u>	Depth Casing Shoe <u>4122</u>							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE <u>12 1/4</u> <u>7 5/8</u>	CASING & TUBING SIZE <u>8 5/8</u> <u>5 1/2</u> <u>2 7/8</u>	DEPTH SET <u>870</u> <u>4122</u> <u>4150</u>	SACKS CEMENT <u>450</u> <u>325</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>10-4-73</u>	Date of Test <u>10/6-73</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Flow</u>	
Length of Test <u>24</u>	Tubing Pressure <u>50 #</u>	Casing Pressure <u>—</u>	Choke Size <u>32/64</u>
Actual Prod. During Test	Oil - Bbls. <u>84</u>	Water - Bbls. <u>396</u>	Gas - MCF <u>NA</u>

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.

117 E. Speakey
(Signature)
Administrative Supervisor
(Title)
10-17-73
(Date)

OIL CONSERVATION COMMISSION

APPROVED 001 22 1973, 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.

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

10-17-73

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 Section 3 No. 345, located in Unit J Section 22, Lea County, New Mexico.

DEPTH	DEGREE	DEPTH	DEGREE	DEPTH	DEGREE
<u>263</u>	<u>1/4</u>	<u>4150</u>	<u>1 1/2</u>		
<u>505</u>	<u>1/4</u>				
<u>1144</u>	<u>1/2</u>				
<u>1359</u>	<u>1/2</u>				
<u>1634</u>	<u>1/2</u>				
<u>1882</u>	<u>3/4</u>				
<u>2124</u>	<u>3/4</u>				
<u>2288</u>	<u>1</u>				
<u>2741</u>	<u>3/4</u>				
<u>3179</u>	<u>1 1/4</u>				
<u>3418</u>	<u>1 1/4</u>				

Yours very truly,

M. E. Speakey

Subscribe and sworn to before me, a Notary Public, in and for Lea County, New Mexico, this 18th day of October, 1973.

7-4-76

My Commission Expires

Bertie E. Dillman
Notary Public