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FILE

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

5-OCC

1-Midland

1-File

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

JUL 29

1 46 PM '65

Operator

Tidewater Oil Company

Address

Box 249, Hobbs, New Mexico

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Casinghead Gas

Dry Gas

Condensate

Other (Please explain)

Formerly Continental's

State KU-16 Well #1

If change of ownership give name and address of previous owner

Continental Oil Company, Box 460, Hobbs, New Mexico

DESCRIPTION OF WELL AND LEASE

Lease Name

East Emont Unit

Well No.

43

Pool Name, including Formation

Emont Queen

Kind of Lease

State, Federal or Fee

State

Location

Unit Letter

I

Feet From The

660

East

Line and

1980

Feet From The

South

Line of Section

16

Township

19 S

Range

37 E

NMPM,

Lea

County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil

Texas New Mexico Pipe Line Company

Address (Give address to which approved copy of this form is to be sent)

Box 1510, Midland, Texas

Name of Authorized Transporter of Casinghead Gas

Warren Petroleum Corporation

Address (Give address to which approved copy of this form is to be sent)

Monument, New Mexico

If well produces oil or liquids, give location of tanks.

Unit

H

Sec.

16

Twp.

19

Rge.

37

Is gas actually connected?

Yes

When

12-4-56

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

COMPLETION DATA

Designate Type of Completion - (X)

Oil Well

Gas Well

New Well

Workover

Deepen

Plug Back

Same Res'tv.

Diff. Res'tv.

Date Spudded

Date Compl. Ready to Prod.

Total Depth

P.B.T.D.

Pool

Name of Producing Formation

Top Oil/Gas Pay

Tubing Depth

Perforations

Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks

Date of Test

Producing Method (Flow, pump, gas lift, etc.)

Length of Test

Tubing Pressure

Casing Pressure

Choke Size

Actual Prod. During Test

Oil-Bbls.

Water-Bbls.

Gas-MCF

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 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.

Original Signed By:

B. M. BREINING

(Signature)

Area Engineer

(Title)

July 23, 1965

(Date)

OIL CONSERVATION COMMISSION

APPROVED

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 Sections I, II, III, and VI only 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.