

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

~~State Well~~
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, N.M.

11-28-59

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Continental Oil Co.

Britt B-15

8

NW

SE

, Well No., in. 1/4 1/4,

(Company or Operator)

(Lease)

J

Sec. 15

T. 20-S

R. 37-E

Eumont

Pool

Unit Letter

Lea

County. Date Spudded 7-21-59

Date Drilling Completed 7-30-59

Please indicate location:

Elevation 3582' DT Total Depth 3872' PBTD

Top Oil/Gas Pay 3494 Name of Prod. Form. Jean (Penrose)

PRODUCING INTERVAL -

Perforations 3497-3573, 3579-3611, 3622-26, 3630-36, 3646-54, 3665-71'.

Open Hole _____ Depth _____ Depth _____
Casing Shoe _____ Tubing _____

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____ Choke

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of Choke load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Size _____

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 12,600 MCF/Day; Hours flowed 48

Choke Size _____ Method of Testing: Calculated Open Flow Potential

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 1000 gals acid, 20,000 gals sandfrac, 600 moth balls.

Casing 993 Tubing 325 Date first new
Press. _____ Press. _____ oil run to tanks _____

Oil Transporter _____

Gas Transporter El Paso Natural Gas Co.

Tubing, Casing and Cementing Record

Size Feet Sax

10 3/4	280	225
7 5/8	1240	425
5 1/2	3761	425

Remarks: Dual completion 7-30-59.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved: _____, 1959

Continental Oil Co.,

(Company or Operator)

OIL CONSERVATION COMMISSION

By: _____

(Signature)

Title: District Superintendent

Send Communications regarding well to:

Continental Oil Co.

Name: _____

Box 427 Hobbs, N.M.

Address: _____

By: _____

Title: District _____