

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
(Revised 7/1/52)

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New 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 **QUADRUPPLICATE** 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 oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

(Place)

(Date)

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

Continental Oil Company State A-36, Well No. 5, in NW 1/4 NE 1/4,
(Company or Operator) (Lease)

9, Sec. 36, T. 20, R. 37, NMPM, Hardy Pool
(Unit)

Les. County. Date Spudded 4-3-56, Date Completed 4-16-56

Please indicate location:

Elevation 3107' Total Depth 3820', BOX DOD 3797'

Top oil/gas pay 3662' Name of Prod. Form Owen

Casing Perforations: 3662-3704', 3726-3740', 3744-3760', 3767-3775',
3785-3792'

Depth to Casing shoe of Prod. String 3799'

Natural Prod. Test BOPD

based on bbls. Oil in Hrs. Mins.

Test after acid or shot 438 BOPD

Based on 73 bbls. Oil in 6 Hrs. 0 Mins.

Gas Well Potential

Size choke in inches 3/4

Date first oil run to tanks or gas to Transmission system: 4-22-56

Transporter taking Oil or Gas: Shell Pipe Line Company

Casing and Cementing Record

Size	Feet	Sax
3 5/8"	331	225
5 1/2"	3799	1506

Remarks:

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

Approved _____, 19____

OIL CONSERVATION COMMISSION

By: _____

Title _____

Continental Oil Company
(Company or Operator)

By: _____
(Signature)

Title District Superintendent
Send Communications regarding well to:

Name Continental Oil Company

Address Box 427, Hobbs, New Mexico