

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

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 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, New Mexico Nov. 11, 1957
(Place) (Date)

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

Continental Oil Company State 1-36, Well No. 11, in SW 1/4, SW 1/4,
(Company or Operator) (Lease)
M, Sec. 36, T. 20, R. 37, NMPM., Eumont Pool
Unit Letter
Lea

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M X	N	O	P

County. Date Spudded 6-17-57 Date Drilling Completed 6-28-57
Elevation 3476 Total Depth 3835 PBD

Top Oil/Gas Pay 3734 Name of Prod. Form Grayburg

PRODUCING INTERVAL -

Perforations 3734-30, 3714-08, 3695-91, 3686-83, 3660-54, 3648-42,
3621-13, 3607-3600. Depth Casing Shoe 3815 Depth Tubing 3609

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 load oil used): 2 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 32/64 Choke

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
8 5/8	330	250
5 1/2	3834	250

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

Test After Acid or Fracture Treatment: MCF/Day; Hours flowed

Choke Size Method of Testing:

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand):

Casing Tubing Date first new
Press. Press. oil run to tanks 11-9-57

Oil Transporter Shell Pipe Line Corp.

Gas Transporter Continental Carbon

Remarks:

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

Approved, 19. Continental Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By: (Signature)
(Signature)

By: District Chief Clerk
Title Send Communications regarding well to:

Title Continental Oil Company

Address Box 427, Hobbs, N. M.