i-	2 1 1 1 F ( C L - S L - )	- ! <del> </del>		
}	DISTR'BUTION SANIA FE	NEW MEXICO OIL CO		
}	FILL	REQUEST F		
t	U.S.G.S.	AUTHORIZATION TO TRAN		
	LAND OFFICE			
	TRANSPORTER OIL	<u> </u>		
ŀ	GAS OPERATOR	-		
1.	PRORATION OFFICE	ī		
1.	Cperator	- 1		
	Continental Cel Company			
	Add 633	1		
ļ	P.C. DOX 460 A	POPPS NIM 88540		
	New Well	Change in Transporter of:		
	Recompletion	Oil Dry Gas		
	Change in Ownership	Casinghead Gas Condens		
	If change of ownership give name			
	and address of previous owner			
н.	DESCRIPTION OF WELL AND Lease Name	LEASE Well Mo., Foc. Na 18, Including For		
į	SEMU Bline bry	100 Blinebry Oi		
	Lecation			
	Unit Letter N : 760	Feet From The S		
	Line of Section 20 To	Ranga 3		
11	DESIGNATION OF TRANSPOR	TED OF OH AND NATURAL GAS		
11.	Name of Authorized Transporter of Ci	TER OF OIL AND NATURAL GAS		
	Continental Oil Su	Jace Transportation		
	Name of Authorized Transporter of Ca			
	Warren Peth	CLONG TWO Edge		
	If well produces oil or liquids, give location of tanks,	0 18 20 38		
		th that from any other lease or pool, g		
IV. COMPLETION DATA  Designate Type of Completion = (X)  Out Well Cas W				
	Date Spudded	Date Compl. Ready to Prod.		
	1-14-79	4-6-79		
	Elevations (DF, RKB, RT, GR) etc.,			
	35883	Blinebry		
	Perforations	1		
	5795-6028			
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE		
	12.14.,	95/51		
	83/4"	7		
٠.	TEST DATA AND REQUEST FOR ALLOWABLE Test must be after			
٠.	OIL WELL	able for this dep		
	Date First New Oil Run To Tanks	Date of Test		
	4-6-79 Lengtr. of Test	Tubing Pressure		
	2d 4x	NA		
	: Actual Prod. During Test	Cil-Bbis.		
		lole		
	GAS WELL Adjudi Prod. Test-MOF/D	Length of Test		
	Adtual Pred. 1681-Mer/5	_engin or rest		
	Testing Method (pitot, back pr.)	Tusing Pressure (Shut-in)		
V.I	CERTIFICATE OF COMPLIAN	CF		
<b>▼ 4</b> .	CERTIFICATE OF COMPETAL	102		
	I hereby certify that the rules and	regulations of the Oil Conservation		
	Commission have been complied	with and that the information given a best of my knowledge and belief.		
	·			

24 1979 Date

NMOCD(5), USGS(2), NMFUL(4) FILE

NSERVATION COMMISSIO. OR ALLOWARIE

Form C-104 Supersedes Old C-104 and C-110

FILE	AND	Effective 1-1-65
u.s.g.s. AUTHORIZAT ON TO TRAN	· · · · · <del>-</del>	PAL CAS
LAND OFFICE	131 OK 1 OIL AND NATU	IVAL GAS
I RANSPORTER OIL		
GAS		
PERATOR		
PRORATION OFFICE		
perator	PERMIN	AD GAS MUST NOT BE
Continental Och Company		Call Most Note that
iddress ' T	机线点 医	S EXCEPTION TO R-4670
P.C. BOX460 HOBBS, NM 88240	\$5.0ETAIN	
Reason(s) for filing (Check proper box)	Other (Please explai	n)
New Well Change in Transporter of:	Kegnist of	and alloward
lecompletion Oil Dry Gas	= Low the	moith of June, 1979
Change in Ownership   Casinghead Gas   Condens	ate	7 (
change of ownership give name		
nd address of previous owner		
ECCDIDITION OF WELL AND LEACE		
ESCRIPTION OF WELL AND LEASE.  Lease Name Well Mo.; Foc. Na sey including For	rmation Kind o	of Lease Lease 1
SEMU Blinebry 100 Blinebry O	il+ Clas State.	Federal of Fee LC 03/1670
coation		
Unit Letter N : 760 Feet From The S	and 1650 Fee	t From The W
Line of Section 20 Township 205 Range 3	8E , N.EM,	Lea cons
ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		<del></del>
	1	h approved copy of this form is to be sent
Continental Cil Suspace Transportation	tupps NM	· · · · · · · · · · · · · · · · · · ·
ame of Authorized Transporter of Carlinghed Gas Cor Try Gas		happroved copy of this form is to be sent;
Warren Petholeon		VM.
well produces oil or liquids,   Unit   Sen. Twr.   Ede.	is gar actually connected?	When
eve location of tanks.	No	
this production is commingled with that from any other lease or pool, g	live commingling order numb	er:
OMPLETION DATA		
Designate Type of Completion $= (X)$   Oil Well   Ods Well	New Wel. Workover Des	epen - Plum Baak - wante Besty Dun Be
	Total Death	P.S.T.C.
Date Spudded Date Compil. Reday to Prod. H4-10~19	6700'	, <b>1</b>
	Top Ci. Gas Pay	Cloll 1 Tuzing Depin
	5794'	600 \'
35888' Blinebry	2114	Deptil Casing Since
5795÷6028		reput casing bites
	CEMENTING BECORD	· · . · · · · · · · · · · · · · ·
TUBING, CASING, AND	DEPTH SET	SACKS CEMENT
HOLE SIZE CASING & TUEING SIZE		
17.77.	1355	625>X
		<del></del>
8 3/1, 7.	G7cc'	210054
		<del></del>
83/4" 7"	6700'	2100 SY
EST DATA AND REQUEST FOR ALLOWABLE Test must be after	G7CC'	<del></del>
EST DATA AND REQUEST FOR ALLOWABLE  Test must be after this deposit. WELL	GRCC'  ter recovery of total volume of in the for full 24 hours)	load oil and must be equal to or exceed top a
EST DATA AND REQUEST FOR ALLOWABLE  ALL WELL  Date First New Oil Run To Tanks  Date of Test	ter recovery of total volume of i oth or be for full 24 hours) Producing Method (Flow, pump	load oil and must be equal to or exceed top a
EST DATA AND REQUEST FOR ALLOWABLE  Test must be after this deposition of the state	GRCC'  ter recovery of total volume of in the for full 24 hours)	load oil and must be equal to or exceed top a
EST DATA AND REQUEST FOR ALLOWABLE Test must be affable. WELL able for this deposition of Test  4-6-19  Engin of Test  Tubing Pressure	ter recovery of total volume of in the or be for full 24 hours)  Producing Method (Flow, pump District)  Casing Pressure	coad oil and must be equal to or exceed top a company, gas lift, etc
EST DATA AND REQUEST FOR ALLOWABLE able for this deposition of Test  H-6-19  June Pressure  Tubing Pressure	ter recovery of total volume of in or be for full 24 hours)  Producing Method (Flow, pump Disky) Cading Pressure  NA Water-Bols.	load oil and must be equal to or exceed top a
EST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  Care First New Cil Run To Tanks  H-6-19  Length of Test  Tubing Pressure  NA  Actual Frod. During Test  Cil-Bols.	ter recovery of total volume of in or be for full 24 hours)  Producing Method (Flow, pump Disky) Cading Pressure  NA Water-Bols.	Choke Size
EST DATA AND REQUEST FOR ALLOWABLE able for this deposition of Test  H-6-19  June Pressure  Tubing Pressure	ter recovery of total volume of in the for full 24 hours)  Producing Method (Flow, pump DUM)  Caping Pressure  NA	Choke Size  A A  Gas-MCF
EST DATA AND REQUEST FOR ALLOWABLE able for this deposit. WELL able for this deposit for the second form of Test form of T	ter recovery of total volume of in or be for full 24 hours)  Producing Method (Flow, pump Disky) Cading Pressure  NA Water-Bols.	Choke Size  A A  Gas-MCF
EST DATA AND REQUEST FOR ALLOWABLE able for this deposition of Test which the state of Test able for this deposition of Test able fo	ter recovery of total volume of in or be for full 24 hours)  Producing Method (Flow, pump Disky) Cading Pressure  NA Water-Bols.	Choke Size  A A  Gas-MCF
EST DATA AND REQUEST FOR ALLOWABLE  II. WELL  Cote First New Oil Run To Tanks  4-6-19  Length of Test  24 WA  Actual Prod. During Test  Oil-Bbls.  CAS WELL	GTCC  ier recovery of total volume of inthe or be for full 24 hours)  Producing Method (Flow, pump  Other)  Casing Pressure  NA  Water-Eds.	Choke Size  NA  Gas-MOF
EST DATA AND REQUEST FOR ALLOWABLE  Test must be affable for this dep  Allower First New Oil Run To Tanks  H-6-19  Tuoing Pressure  24 WS.  Actual Prod. During Test  Oil-Bbls.  CAS WELL  Actual Prod. Test-MCF/D  Length of Test	GTCC  ier recovery of total volume of inthe or be for full 24 hours)  Producing Method (Flow, pump  Other)  Casing Pressure  NA  Water-Eds.	Choke Size  NA  Gas-MOF
EST DATA AND REQUEST FOR ALLOWABLE able for this den able for this	GRCC  ter recovery of total volume of inthe or be for full 24 hours)  Producing Method (Flow, pump  Odding Pressure  NA  Water-Bols.  Bols, Condensate/MMCF	Choke Size  Choke Size  AA  Gas-MCF  Digas Gravity of Congensate
EST DATA AND REQUEST FOR ALLOWABLE  Test must be after able for this deposition of Test  H-6-19  Length of Test  Tusing Pressure  NA  Actual Prod. During Test  Cit-Bols.  GAS WELL  Actual Prod. Test-MOF/D  Length of Test  Length of Test  Tusing Pressure (Shut-in)	CTCC  ier recovery of total volume of inther or be for full 24 hours)  Producing Method (Flow, pump Disky)  Casing Pressure  NA  Water-Eb.s.  SCO  Bols, Condensate/MMCF	Choke Size  Gravity of Congensate  Choke Size
Test DATA AND REQUEST FOR ALLOWABLE  Test must be affable, WFLL  Date First New Oil Run To Tanks  H-6-19  Length of Test  Tubing Pressure  NA  Actual Frod. During Test  Oil-Bbls.  GAS WELL  Actual Frod. Test-MOF/D  Length of Test	CTCC  ier recovery of total volume of inther or be for full 24 hours)  Producing Method (Flow, pump Disky)  Casing Pressure  NA  Water-Eb.s.  SCO  Bols, Condensate/MMCF	Choke Size  Choke Size  AA  Gas-MCF  Digas Gravity of Congensate
Test must be affable. WELL  Date First New Oil Run To Tanks Date of Test  4-6-19  Length of Test  24 WA.  Motua, Prod. During Test  Cil-Bbis.  Certificate Of Compliance  Tubing Pressure  Dipolar  Tubing Pressure  Tubing Pressure  Tubing Pressure  Tubing Pressure  Tubing Pressure  Tubing Pressure  Tubing Pressure (Shut-in)	CTCC  ier recovery of total volume of inther or be for full 24 hours)  Producing Method (Flow, pump Disky)  Casing Pressure  NA  Water-Eb.s.  SCO  Bols, Condensate/MMCF	Choke Size  Gravity of Congensate  Choke Size
EST DATA AND REQUEST FOR ALLOWABLE  DILL WELL  Cate First New Oil Run To Tanks  A- 6-79  Engin of Test  Tubing Pressure  NA  Actual Prod. During Test  Cil-Bbls.  Certificate of Compliance  Description of Test  Tubing Pressure (Shut-in)  Certificate of Compliance  hereby certify that the rules and regulations of the Oil Conservation formmission have been complied with and that the information given	GTCC  ter recovery of total volume of the orbe for full 24 hours)  Producing Method (Flow, pump Office)  Casing Pressure  NA  Water-Bos.  Boss. Condensate/MMCF  Casing Pressure (Shut-in)  OIL CONS  APPROVED	Choke Size  Choke Size
EST DATA AND REQUEST FOR ALLOWABLE  Test must be affected. WELL  Date First New Oil Run To Tanks  H-6-19  Enqtin of Test  Tubing Pressure  NA  Actual Prod. During Test  Cil-Bbls.  Casting Method (pitot, back pr.)  Tubing Pressure (Shut-in)  ERTIFICATE OF COMPLIANCE  hereby certify that the rules and regulations of the Oil Conservation commission have been compiled with and that the information given	GTCC  ter recovery of total volume of the orbe for full 24 hours)  Producing Method (Flow, pump Office)  Casing Pressure  NA  Water-Bos.  Boss. Condensate/MMCF  Casing Pressure (Shut-in)  OIL CONS  APPROVED	Choke Size  Choke Size
Test must be affable. Test must be affable. WELL  Date First New Oil Run To Tanks Date of Test  4-6-19  Length of Test  Z4 W3.  Motua. Prod. During Test  Cil-Bbls.  Tubing Pressure  NA  SAS WELL  Actual Prod. Test-MOF/D Length of Test  Tubing Pressure (Shut-in)  CERTIFICATE OF COMPLIANCE  hereby certify that the rules and regulations of the Oil Conservation	GRCC  ter recovery of total volume of interpretation be for full 24 hours)  Producing Method (Flow, pump Dunky)  Casing Pressure  NA  Water-Eb.s.  Scondensate/MMCF  Casing Pressure (Shut-in)  OIL CONS  APPROVED	Choke Size  Choke Size

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

R r. C U / L J

JIN : 9 Gar

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HUBBZT NT ME

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REDEIAT D

INCLINATION REPORT							
OPERATOR Continental Oil Company ADDRESS PO Box 460, Hobbs, New Mexico 88240							
LEASE NAME_	SEMU Burger "B"	WELL NO100 FIELD					
LOCATION	Section 20, T-20S, R-38E, Lea	County, New Mexico					
DEPTH	ANGLE INCLINATION DEGREES	DISPLACEMENT	DISPLACEMENT ACCUMULATED				
354 442 724 1180 1350 1858 2352 2721 3203 3668 4129 4660 5154 5271 5750 5251 6700	1/2 1/2 1/4 1/2 1/2 1/4 1/4 1/4 1/4 1/2 3/4 3/4 1 1 1/2 1/2 3/4 3/4 3/4 3/4 3/4 3/4 3/4 3/4 3/4 3/4	CACTUS DRI	3.0798 3.8454 5.0862 9.0534 10.5324 12.7676 14.9412 18.1515 24.4657 30.5572 38.6247 43.2444 47.5422 49.0749 55.3498 62.0439 67.7948				
AFFIDAVIT:							

Before me, the undersigned authority, appeared known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such  $\gamma$ well was not intentionally deviated from the true vertical whatsoever.

AFFIANT'S SIGNATURE

Sworn and subscribed to in my presence on this the 6th day of February

MY COMMISSION EXPIRES MARCH 1, 1980

SEAL

Notary Public in and for the County of Lea, State of New Mexico