

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 February 4, 1959
(Place) (Date)

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

Continental Oil Company N.M. Blinobry, Well No. 20, in 1/4, 1/4,
(Company or Operator) (Lease)

Sec. 23, T. 20, R. 30, NMPM, Blinobry Pool

County. Date Spudded 8-27-52 Date Drilling Completed 10-27-52
Elevation 3550 Total Depth 9381 PBD 6237

Please indicate location:

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

Top Oil/Gas Pay 5805 Name of Prod. Form. Blinobry

PRODUCING INTERVAL -

Perforations 5805-25, 5816-46, 5932-52, 5996-6011, 6038-63, 6058-6116
6110-61, 6110-16, 6221-31. Depth Casing Shoe Depth Tubing

OIL WELL TEST - Blinobry name

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): 15 bbls. oil, 0 bbls water in 24 hrs, 0 min. Size 20/64

GAS WELL TEST - w/247 MCF Gas. COR-16, 467

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

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 oil run to tanks 2/1/59
Press. Press.

Oil Transporter Shell Pipe Line Corporation

Gas Transporter

Remarks: Allowable requested for Blinobry pay. Tabl report will be submitted when completed. Well is being dual completed. Grant 346

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: J. W. Ewing
(Signature)

By: Title Dist. Supt.
Send Communications regarding well to:

Title Name Continental Oil Company

Address Hobbs, New Mexico