

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

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

REQUEST FOR ~~(OIL)~~ - (GAS) ALLOWABLE

Dual Completion

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-104 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.

Eunice, New Mexico

2-27-57

(Place)

(Date)

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

Continental Oil Company Lockhart B-1

(Company or Operator)

Well No. 4

in SW

NE

1/4

G

Sec. 1

T. 22 S

R. 36 E

NMPM,

Eumont

Pool

Unit Letter

Lea

County. Date started 1-15-57

Date Completed 2-22-57

Please indicate location:

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

Elevation 3513'

Total Depth 3800'

P.B.

Top oil/gas pay 3372'

Name of Prod. Form Queen

Casing Perforations: 3372-3402', 3414-36', 3440-51'

or

Depth to Casing shoe of Prod. String 3455-61', 3494-3544'

Natural Prod. Test

BOPD

based on bbls. Oil in

Hrs.

Mins.

Test after acid or shot

BOPD

Based on bbls. Oil in

Hrs.

Mins.

Gas Well Potential Cal. open flow potential 5300 MCFPD

Size choke in inches

Date first oil run to tanks or gas to Transmission system: Not connected

Transporter taking Oil or Gas: El Paso Natural Gas Co.

Remarks:

Dual completed Arrowhead-Eumont Pools 2-22-57
LC 032099 b

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)

By

(Signature)

Title District Superintendent

Send Communications regarding well to:

Name J. R. Parker

Address Box 68, Eunice, New Mexico

OIL CONSERVATION COMMISSION

By: E. G. Fischer

Title _____