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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

I. Operator CONTINENTAL OIL COMPANY  
Address P.O. Box 460, HOBBS, N. M. 88240  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain) RECLASSIFIED; OIL TO GAS

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE  
Lease Name STATE "E" Well No. 4 Pool Name, Including Formation JALMAT GAS Kind of Lease STATE Lease No. B-1536  
Location  
Unit Letter E; 1980 Feet From The NORTH Line and 660 Feet From The WEST  
Line of Section 17 Township 22S Range 36E, NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☒  
TEXAS-NEW MEXICO PIPE LINE Address (Give address to which approved copy of this form is to be sent) MIDLAND, TEXAS  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒  
PHILLIPS PETROLEUM Address (Give address to which approved copy of this form is to be sent) HOBBS, NEW MEXICO  
If well produces oil or liquids, give location of tanks. Unit 0 Sec. 17 Twp. 22 Rge. 36E Is gas actually connected? No When \_\_\_\_\_

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

IV. COMPLETION DATA  
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.  
X RECLASSIFIED X  
Date Spudded 4-7-38 Date Compl. Ready to Prod. 11-11-75 Total Depth 3880' P.B.T.D. 3450'  
Elevations (DF, RKB, RT, GR, etc.) GR 3580' Name of Producing Formation JALMAT Top Oil/Gas Pay 3192' Tubing Depth 3300'  
Perforations 3192-3408' Depth Casing Shoe 3715'  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  
15" 13" 264' 250  
12 1/4" 9 5/8" 3075' 150  
8 1/4" 7" 3715' 30  
2 7/8" 3300'

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)  
Date First New Oil Run To Tanks \_\_\_\_\_ Date of Test \_\_\_\_\_ Producing Method (Flow, pump, gas lift, etc.) \_\_\_\_\_  
Length of Test \_\_\_\_\_ Tubing Pressure \_\_\_\_\_ Casing Pressure \_\_\_\_\_ Choke Size \_\_\_\_\_  
Actual Prod. During Test \_\_\_\_\_ Oil-Bbls. \_\_\_\_\_ Water-Bbls. \_\_\_\_\_ Gas-MCF \_\_\_\_\_

GAS WELL  
Actual Prod. Test-MCF/D 4 Length of Test 24 Hr. Bbls. Condensate/MMCF \_\_\_\_\_ Gravity of Condensate \_\_\_\_\_  
Testing Method (pitot, back pr.) BP Tubing Pressure (shut-in) \_\_\_\_\_ Casing Pressure (shut-in) \_\_\_\_\_ Choke Size OPEN

VI. CERTIFICATE OF COMPLIANCE  
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  
Bern A. Lee (Signature)  
ADMINISTRATIVE SUPERVISOR (Title)  
9-27-77 (Date)  
NMOCC, HOBBS (5)-FILE  
OIL CONSERVATION COMMISSION  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_  
TITLE \_\_\_\_\_  
This form is to be filed in compliance with RULE 1104.  
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.