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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, New Mexico	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Britt B	Well No. 24	Pool Name, including Formation Monument-Tubb	Kind of Lease Federal
Location			
Unit Letter L ; 1980 Feet From The South Line and 660 Feet From The West			
Line of Section 11 , Township 20-S Range 37-E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Atlantic Pipe Line Company	Address (Give address to which approved copy of this form is to be sent) Box 1190, Midland, Texas		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Box 67, Monument, New Mexico		
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 15	Twp. 20
	Rge. 37	Is gas actually connected? Yes	When 6-8-65

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

PC-33

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-11-65	Date Compl. Ready to Prod. 6-8-65		Total Depth 7,000		P.B.T.D.			
Pool Monument Tubb	Name of Producing Formation Tubb		Top Oil/Gas Pay 6492		Tubing Depth 6448			
Perforations 6494, 6496, 6498, 6506, 6570, 6584, 6592, 6596, 6601, /					Depth Casing Shoe 4 1/2" @ 7000'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11"	7 5/8"		1344		470			
6 3/4"	4 1/2"		7000		600			

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 6-8-65	Date of Test 6-8-65	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 18 1/2	Tubing Pressure 750	Casing Pressure Pkr	Choke Size 18/64
Actual Prod. During Test 139	Oil - Bbls. 139	Water - Bbls. 20	Gas - MCF 455

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	Choke Size

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.

Signed ROBERT GAULT III

(Signature)

Staff Supervisor

(Title)

6-11-65

USGS-2, NMOCC-5, (Date)

PAN AM HOBBS-3, ATL ROS-2, CALIF MID-2

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 Sections I, II, III, and VI only 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.