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U.S.G.S.		
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  
Address  
Reason(s) for filing (Check proper box)  
New Well ☒ Change In Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change In Ownership ☐ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner  
THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE  
Lease Name  
Well No.  
Pool Name, Including Formation  
Kind of Lease  
Lease No.  
Location  
Unit Letter  
Feet From The  
Line and  
Feet From The  
Line of Section  
Township  
Range  
NMPM,  
County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil  
Address (Give address to which approved copy of this form is to be sent)  
Name of Authorized Transporter of Casinghead Gas  
Address (Give address to which approved copy of this form is to be sent)  
If well produces oil or liquids, give location of tanks.  
Unit  
Sec.  
Twp.  
Rge.  
Is gas actually connected?  
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.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	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.  
Signature  
Title  
Date

OIL CONSERVATION COMMISSION  
APPROVED  
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.

more (s) 4365(1) 4365(1) file

CONTINENTAL OIL COMPANY

P. O. Box 460  
Hobbs, New Mexico  
10-7-74

New Mexico Oil Conservation Commission  
P. O. Box 1980  
Hobbs, New Mexico 88240

Gentlemen:

In compliance with New Mexico Oil Conservation Commission Rule III, we are submitting below a list of deviation surveys taken on Continental Oil Company's Warren Unit No. 31, located Unit Unit 0 Section 27, Lea County, New Mexico.

DEPTH	DEGREE	DEPTH	DEGREE	DEPTH	DEGREE
<u>250</u>	<u>1/2</u>	<u>3065</u>	<u>3/4</u>	_____	_____
<u>650</u>	<u>1/2</u>	<u>3300</u>	<u>1/4</u>	_____	_____
<u>871</u>	<u>3/4</u>	<u>3790</u>	<u>3/4</u>	_____	_____
<u>1068</u>	<u>1</u>	<u>5700</u>	<u>3/4</u>	_____	_____
<u>1292</u>	<u>3/4</u>	<u>6200</u>	<u>3/4</u>	_____	_____
<u>1500</u>	<u>3/4</u>	<u>6450</u>	<u>1/4</u>	_____	_____
<u>1749</u>	<u>3/4</u>	<u>6690</u>	<u>1</u>	_____	_____
<u>2002</u>	<u>3/4</u>	<u>6960</u>	<u>1</u>	_____	_____
<u>2253</u>	<u>3/4</u>	<u>7045</u>	<u>1/2</u>	_____	_____
<u>2534</u>	<u>3/4</u>	_____	_____	_____	_____
<u>2756</u>	<u>1</u>	_____	_____	_____	_____

Yours very truly,

*Robert Paul*

Subscribed and sworn to before me, a Notary Public, in and for Lea County, New Mexico, this 7th day of October, 1974.

7-4-76

My Commission Expire

*Butler E. Sullivan*  
Notary Public