NO. OF COPIES REC	EIVED	į	
DISTRIBUTION			
SANTA FE			
FILE			!
U.S.G.S.		1	
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
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NO. OF COPIES RECEIVED				
DISTRIBUTION	NEW MEXICO OIL	CO OIL CONSERVATION COMMIC N Form C-104		
SANTA FE		REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-1.		
FILE	AND Effective 1-1-65			
U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
LAND OFFICE	┥ .			
TRANSPORTER GAS				
OPERATOR	<u>,</u>			
PRORATION OFFICE Operator				
CONTINENTAL Address	OIL COMPANY			
$Q \wedge Q = (1/2)$	11-11	•		
Reason(s) for filing (Check proper bo	1 Hobbs, NEW 19	exico		
New Well	Change in Transporter of:	Other (Please explain)		
Recompletion	Oil Dry (~~		
Change in Ownership	=	lensate		
V temps				
f change of ownership give name and address of previous owner				
address of previous owner				
DESCRIPTION OF WELL AND	LEASE			
Lease Name	Well No. Pool Name, Including	Formation Kind of Leas	Lease 140.	
MEYER B 28 A AC	1/2 3 Eumont	Ducen State, Feder	al or Fee FED	
Location	, 			
Unit Letter ; 7	O Feet From The NORTH L	ine and <u>1880</u> Feet Fram	The WEST	
・ カ カ		<u>_</u>		
Line of Section 33 To	ownship 20-5 Range	37- € , NMPM,	LEA County	
DESIGNATION OF TRANSPOR Name of Authorized Transporter of O	TER OF OIL AND NATURAL G	AS Address (Give address to which appro		
, tame of framerized transporter of or	· ·	Address (Give address to writer appro	oved copy of this form is to be sent)	
Name of Authorized Transporter of Co	singhead Gas or Dry Gas	Address (Give address to which appro	and conv of this form is to be seed	
EL PASO NATU	· · · · · · · · · · · · · · · · · · ·		, /,	
If well produces oil or liquids,	Unit Sec. Twp. Rge.		HWEST MIDLAND, TX.	
give location of tanks,		No		
this production is commingled w	ith that from any other lease or pool			
COMPLETION DATA	th that hom any other rease or poor	, give comminging order number:		
Designate Type of Completi	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.	
12-23-74	1-22-75	3760	3720	
Elevations (DF, RKB, RT, GR, etc.) 5527 GL		Top Oil/Gas Pay	Tubing Depth	
Perforations	Eumont	3563	3701	
3650.64 69 74 80	,90,3690,3563,78,8	3 88 91 3111 5 31 11	Depth Casing Shoe	
, , , , , , , , , , , , , , , , , , ,	TIRING CASING AN	ID CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12/4	8 78 CSQ	413	SACKS CEMENT 210 SKS (CLASS C)	
6 14	5 /2	3760	285 sks (CLASS C)	
	5 /2	3701	000 3113 (CEASS C)	
EST DATA AND REQUEST F	OR ALLOWABLE (Test must be	after recovery of total volume of load oil	and must be equal to or exceed top allow-	
IL WELL		epth or be for full 24 hours)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gds-MCF	
		<u> </u>		
HEST TEST IC	lee the xilly learn	Connection to C	2 . 1	
Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Condensate	
	Langer of Teat	Bots, Condensatis/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
is said fill the first fill fill fill fill fill fill fill fil	rasing resource (Singe-Xii)	Odding P. Booms (Date - 11)	Chore 5.25	
EPTIFICATE OF COURTIAN	CF.	du constant	Tion con many	
ERTIFICATE OF COMPLIAN	CE	OIL CONSERVA	ATION COMMISSION	
hashy passify shas sha anta- and	regulations of the Oil Conservation	APPROVED		
ommission have been complied t	with and that the information given			
	best of my knowledge and belief.	ВУ	#	
		TITLE	- NO. 12 CA	
E Less	and we	This form is to be filed in	-	
	ature)		vable for a newly drilled or deepened nied by a tabulation of the deviation	
Adra Superus	•	tests taken on the well in accor		

March 20, 1975

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SAMORE 2 MSC3, 3 Partien

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.

. JED

APR 0 1975 CIL COMSERVATION COMMIL LIGBOS, N. M.