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U.S.G.S.	
LAND OFFICE	
TRANSPORTED BY	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

Supersedes Old C-104 and C-110  
Effective 1-1-65REQUEST FOR ALLOWABLE  
AND

## AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	Continental Oil Company		
Address	Box 400 Hoot. N.M. 88242		
Reason(s) for filing (check appropriate box)	Other (if leave explain)		
New Well	<input checked="" type="checkbox"/>	Group in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Highhead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

If change of ownership give name  
and address of previous owner

## II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, including Formation	Kind of Lease
Winters Unit A/1		34	Blindly Oil & Gas	State, Federal or Fee
Location				
Unit Letter	C	660	Feet From The North Line and 1980	Feet From The West
Line of Section	34	Township	20-S	Range
			38-E	N.M.P.M. LCR
				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"/>	Address (Give address to which approved copy of this form is to be sent)					
Shell Pipeline Company	Midland Texas					
Name of Authorized Transporter of Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Skelly Oil Corporation	El Paso, N.M.					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually compressed?	When
	L	33	20	38	Yes	9-5-75

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	Steam Well	Workover	Deepen	Plug Back	Side Route	DMF. Rest.
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>					
Date Spudded	Date Set. Ready to Prod.		Total Depth		P.B.T.D.			
8-1-75	9-4-75		6975		6880			
Elevation (ft.) (Top of Oil, Gas, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tabling Depth			
	Blindly Oil		5813		5938			
Water depth	5815, 19, 43, 48, 75, 79				Depth casing face			
					10675			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 1/2		1420		600			
	7		6225		1225			
	2 7/8		6400					

## V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of lead oil and must be equal to or exceed top allowable for this depth or 6 hrs for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
9-5-75	9-10-75	Flow	
Length of Test	Testing Pressure	Casing Pressure	Choke Size
24 HRS	550		19/64
Action Prod. During Test	Oil-B.P.S.	Water-B.P.S.	Gas-MOF
	130	5	360

## GAS WELL

Action Prod. During Test	Length of Test	Rate, Condensate/GAS-MOF	Gravity of Condensate
	Testing Pressure	Casing Pressure	Choke Size

## VI. OTHER COMMENTS AND SIGNATURES

I hereby certify that the data and information of the Oil Conservation Commission have been completed with accuracy and the information given herein is true and correct to the best of my knowledge and belief.

## OIL CONSERVATION COMMISSION

SEP 24 1975

APPROVED BY: John W. Ryan  
Geologist

This form is to be filled in compliance with RULE 1103.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a calculation of the deviation of the well from the vertical in compliance with RULE 1107.

Field Name \_\_\_\_\_ County Lea State N.M.  
Operator Continental Oil Company Address P.O. Box 460, Hobbs, N.M.  
Lease Name & No: Warren #34 Survey \_\_\_\_\_ 88240

RECORD OF INCLINATION

Depth (feet)	Angle of Inclination (degrees)	Displacement(feet)	Accumulative Displacement (feet)
85	1/4	.37	.37
150	1/2	.57	.94
400	1/2	2.18	3.12
650	3/4	3.28	6.40
900	3/4	3.28	9.68
1000	3/4	1.31	10.99
1250	1/2	2.18	13.17
1470	3/4	2.88	16.05
1943	3/4	6.20	22.25
2338	3/4	5.17	27.42
2830	3/4	6.45	33.87
3260	3/4	5.63	39.50
3760	3/4	6.55	46.05
4230	3/4	6.16	52.21
4450	1	3.85	56.06
4850	1	7.00	63.06
5176	1	5.71	68.77
5400	1	3.92	72.69
5708	3/4	4.03	76.72
6200	1-1/4	10.73	87.45
6492	3/4	3.82	91.27
6797	1-1/4	6.65	97.92
6975	1-1/4	3.88	101.80

Total Displacement 101.80

Survey was run in Open Hole Distance to the nearest lease line \_\_\_\_\_.

Certification of personal knowledge of Inclination Data:

I hereby certify that I have personal knowledge of the data and facts placed on this form, and that such information given above is true and complete.

Lois Mary Robison  
Signature

TRG Drilling Corporation  
Company

State of Texas                    )  
County of Midland            )(

Before me, the undersigned, a Notary Public in and for said County and State, on this day personally appeared Lois Mary Robison known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he executed the same for the purpose and consideration therein expressed and in the capacity therein stated.

GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS 20th DAY OF August 19 75.

My Commission Expires

Mary Ann Ferguson  
Notary Public in and for said  
County and State.

June 1, 1977