

CONTINENTAL OIL COMPANY

P. O. Box 460
Hobbs, New Mexico

11-5-75

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 SAMU P. ANN No. 96, located Unit Unit I Section 23, LEA County, New Mexico.

DEPTH	DEGREE	DEPTH	DEGREE	DEPTH	DEGREE
<u>498</u>	<u>3/4°</u>	<u>6140</u>	<u>3/4</u>	<u> </u>	<u> </u>
<u>995</u>	<u>1/4</u>	<u>6630</u>	<u>1/2</u>	<u> </u>	<u> </u>
<u>2500</u>	<u>1</u>	<u>7400</u>	<u>1/2</u>	<u> </u>	<u> </u>
<u>2800</u>	<u>1 1/4</u>	<u>7667</u>	<u>1</u>	<u> </u>	<u> </u>
<u>3270</u>	<u>1 3/4</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>3450</u>	<u>1 1/4</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>3675</u>	<u>1</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>4458</u>	<u>3/4</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>4797</u>	<u>1</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>5272</u>	<u>1</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>5810</u>	<u>3/4</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

Yours very truly,

Subscribed and sworn to before me, a Notary Public, in and for Lea County, New Mexico, this 5th day of NOV, 1975.

7-4-76
My Commission Expire

Robert E. Puller
Notary Public

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
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 **CONTINENTAL OIL COMPANY**
Address **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)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name SEMU PENNSYLVANIAN	Well No. 96	Pool Name, Including Formation CASS PENN	Kind of Lease State, <u>Federal</u> or Fee	Lease No. NM 0557686
Location Unit Letter I ; 1650 Feet From The SOUTH Line and 990 Feet From The EAST Line of Section 23 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"/> PERMIAN CORPORATION	Address (Give address to which approved copy of this form is to be sent) MIDLAND, TEXAS					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS PETROLEUM	Address (Give address to which approved copy of this form is to be sent) ODESSA, TEXAS					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 23	Twp. 20	Rge. 37	Is gas actually connected? YES	When 10-19-75

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 8-21-75	Date Compl. Ready to Prod. 10-19-75		Total Depth 7825		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3523 GR	Name of Producing Formation PENNSYLVANIAN		Top Oil/Gas Pay 7660'		Tubing Depth 7700			
Perforations 7669'-71'; 7684'-86'; 2776'-2800'					Depth Casing Shoe 7822			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2	13 3/8		498		475			
	8 5/8		4197		3000			
	5 1/2		7822		700			
	2 7/8		7669					

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 10-23-75	Date of Test 11-3-75	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24	Tubing Pressure 50 #	Casing Pressure —	Choke Size —
Actual Prod. During Test	Oil-Bbls. 17	Water-Bbls. 4	Gas-MCF -0-

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

Robert E. Smith
(Signature)

Associate Staff Asst.
(Title)

11-5-75
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY **Jerry Sexton**
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.

NMCC (1) - USGS (2) - NMOPM - File