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DISTRIBUTION SANTA FE FILE U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
INANSFORTER	GAS	
OPERATOR		
PRORATION OF	ICE	

	DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR	REQUEST F	ONSERVATION COMMISSI FOR ALLOWABLE AND NSPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65 AS		
I.	PRORATION OFFICE Operator					
	Continental Oil Co					
	Sox 460 Worth 1 m 88248					
	Reason(s) for filing (Check proper box) New Well	Change in Transporter of:		less have		
	Recompletion	Oil Dry Gas	2 Jany	w Und		
Reason(s) for filing (Check proper box) New Well Change in Transporter of: Change in Ownership Casinghead Gas Condensate Other (Please explain) Change in Ownership Waryer Unit Change in Ownership Casinghead Gas Condensate						
	If change of ownership give name and address of previous owner					
II. DESCRIPTION OF WELL AND LEASE.						
44.	Lease Name Walley Will Blowdy Brey Location	Well No. Fool Name, Including Fo 38 Blischey OILX		br Fee C C 0 63458		
	Unit Letter F: 1980 Feet From The HONA Line and 1988 Feet From The West					
	_	wiship 2 S Range	38Ē, NMPM, LE	County County		
Ш.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	S Address (Give address to which approv	ed copy of this form is to be sent)		
	Call backers		M, d/A ad /Cx AS Address (Give address to which approv	and come of this form is to be sent		
	Name of Authorized Transporter of Cas	singhead Gas 🕱 or Dry Gas 🗔	Mayume - I who	ea copy of this form is to be sens,		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	1-31.76		
	give location of tanks.	th that from any other lease or pool,	give commingling order number:	7 7		
	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.		
	Designate Type of Completic					
	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		
	TEST DATA AND REQUEST F			1		
V.	and must be equal to or exceed top allow-					
	Date First New Oi. 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.	Gas-MCF		
	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		
				ATION COMMISSION		
4Å	CERTIFICATE OF COMPLIANCE		1	TION COMMISSION		
	I hereby certify that the rules and regulations of the Oil Conservation commission have been complied with and that the information given		APPROVED, 19			
above is true and complete to the best of my knowledge and belief		BY Orig. Signed by John Runyan TITLE Goologist				
			11.			
			This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despended to the deviation.			
S. Dulinga (Signature) S. Stop and (Title) 4-11-77		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.				
					(Title)	
Jule		well name or number, or transporter, or other such change of condition.				

Nmocc (5) 436541 em Sa(4) Sile

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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APE 13 1977

CIL COMM. HOBBS, R. M.