

DATE RECEIVED	
AREA	
FILE	
UNIT	
LOCAL OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGISTRATION 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. CONTINENTAL OIL COMPANY  
Address P.O. Box 460, Hobbs, N.M. 88240  
Reason(s) for filing (check proper box) ☒ New Well ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐ Other (Please explain) 1/1

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE  
Well Name WARREN UNIT - TUBB Pool Name, including Formation 42 WARREN TUBB GAS Kind of Lease FEDERAL Lease No. LC 031695 (6)  
Unit Letter I 1980 Feet From The SOUTH Line and 660 Feet From The EAST Line  
Date of Section 27 Township 20-S Range 38-E, NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☐ or Condensate ☒ SMALL PIPE LINE Address (Give address to which approved copy of this form is to be sent) MIDLAND, TEXAS  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ EL PASO NATURAL GAS Co. Address (Give address to which approved copy of this form is to be sent) MIDLAND, TEXAS  
If well produces oil or liquids, give location of tanks. Unit E Sec. 27 Twp. 20 Rge. 38 Is gas actually connected? No 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 11-1-76 Date Compl. Ready to Prod. 3-9-77 Total Depth 7090 P.B.T.D.  
Elevations (DF, RKB, RT, GR, etc.) GR. 3550 Name of Producing Formation TUBB Top Oil/Gas Pay 6576' Tubing Depth 6544'  
Perforations 6578', 28', 6613', 16', 35', 47', 62', 69' & 74' (1 JSFF) Depth Casing Shoe 7090'  
TUBING, CASING, AND CEMENTING RECORD  
HOLE SIZE 12 1/4" CASING & TUBING SIZE 9 5/8" DEPTH SET 1524' SACKS CEMENT 675  
8 3/4" 7" 7090' 1675  
2 3/8" BTRC 6544'

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
<u>2050</u>	<u>3.5 Hr.</u>	<u>TRACE</u>	
Testing Method (piston, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size <u>32/64 74</u>

ORIFICE WELL TESTER

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.

C. R. Bradley  
(Signature)  
Mr. J. Staff  
(Signature)  
5-4-77  
(Date)

NOTE (5) HSGS (2) NCEU (1) FILE

OIL CONSERVATION COMMISSION

APPROVED AUG 20 1977  
BY [Signature]  
TITLE SURVEYOR IN CHARGE

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.

RECEIVED

MAY 5 1977

OIL CONSERVATION COMM.  
HOBBS, N. M.