## SANTA FE, NEW MEXICO

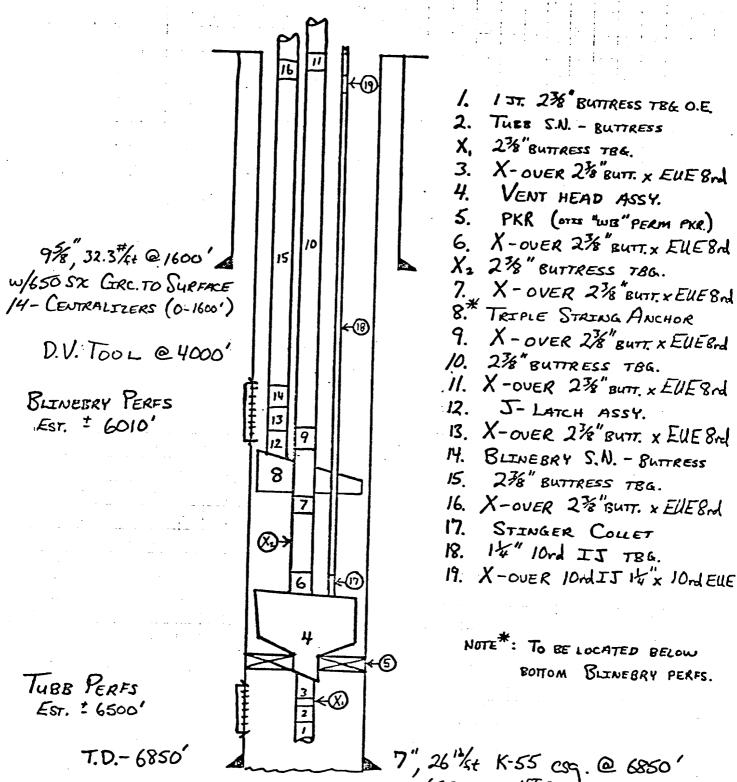
## APPLICATION FOR MULTIPLE COMPLETION

			County		Date
	Continenta	al Oil Company	Le	a	12-15-77
Address	-	•	Lease		Well No.
		lobbs. N. M.	Warren	Unit	45
l_ocation	Unit	Section	Township		Range
or Well	N N	26	<u> 20-s</u>		38-E
I. Has th	ie New Mexico Uil Conserva	tion Commission heretofore	e authorized the m	ultiple completion o	f a well in these same pools or in the
same 2	zones within one mile of the	subject well? YES y	_ NO		
2. If answ		instance: Order No. <sub>MC</sub> arren Unit No. 41	<del>2238</del> ; 0	perator, Lease, and	Well No.: Continental Oil
3. The following facts are submitted:		Upper Zone		Intermediate Zone	Lower Zone
a. Nam	ne of Pool and Formation	Blinebry Oil & G	as		Warren Tubb
b. Top and Bottom of		Difficulty Off & Gas			wallen lubb
P	ay Section	6061-6068			6614-6706
(F	erforations)	0001 0000			0014-0700
c. Typ	e of production (Oil or Gas)	0i1			011
d. Meth	nod of Production			·-··	<u> </u>
(F	Flowing or Artificial Lift)	Artificial Lift			Artificial Lift
. The foll	lowing are attached. (Please			<del></del>	THE THE TOTAL BLIC
	thereon. (If such log is no	t available at the time app	lication is filed,	it shall be submitted	es and intervals of perforation indicated
. List all Co	offset operators to the lease ntinental Oil Compa	ny is offset opera	ator		g address.
, List all	ntinental Oil Compa	ny is offset opera	ator		g address.
Co	ntinental Oil Compa	ny is offset opera	ator		g address.
Were all of such a	operators listed in Item 5 ab notification	ove notified and furnished	a copy of this ap	plication? YES * Supervisor of the	g address.  NO If answer is yes, give date. Continental Oil
. Were all of such a	operators listed in Item 5 ab notification	ove notified and furnished state that I am the Admi any), and that I am authori that the facts stated thereis A FE (2)	a copy of this ap	Supervisor of the any to make this repand complete to the	NO If answer is yes, give date  Continental Oil  cort; and that this report was prepared be best of my knowledge.
. Were all of such a	operators listed in Item 5 abnotification  ICATE: I, the undersigned,  ———————————————————————————————————	ove notified and furnished state that I am the Admi any), and that I am authori that the facts stated thereis A FE (2)	a copy of this ap	Supervisor of the any to make this repand complete to the	NO If answer is yes, give date  Continental Oil  cort; and that this report was prepared be best of my knowledge.
. Were all of such a CERTIF	operators listed in Item 5 ab notification	ove notified and furnished  state that I am the Admi any), and that I am author hat the facts stated therein A FE (2)	a copy of this ap	Supervisor of the any to make this rep and complete to the	NO If answer is yes, give date  Continental Oil  cort; and that this report was prepared be best of my knowledge.

Should waivers from all offset operators not accompany an application for administrative approval, the New Mexico Oil Conservation Commission will hold the application for a period of twenty (20) days from date of receipt by the Commission's Santa Fe office. If, after said twenty-day period, no protest nor request for hearing is received by the Santa Fe office, the application will then be processed.

NOTE: If the proposed multiple completion will result in an unorthodox well location and/or a non-standard proration unit in either or both of the producing zones, then separate application for approval of the same should be filed simultaneously with this application.

## WARREN UNIT, WELL NO. 45 PROPOSED COMPLETION EQUIPMENT



SRB 11/22/76 7", 26" St K-55 CSq. @ 6850'
W/550 SX-1ST STAGE TO D.U. TOOL.
W/550 SX-200 STAGE. EST. TOC-1600'.

10 - CENTRALIZERS (6000'-6400')

