SANTA FE, NEW MEXICO

APPLICATION FOR MULTIPLE COMPLETION

Operator		County	County		Date	
Continental Oil Company			Lea		11-15-78	
Address		Lease	Lease		Well No.	
P. O. Box 460, Hob	bs, New Mexico 88		cen Unit	D	55	
Location Unit	Section	lownsnip	lownship		Range	
or Well G	26	26 20S Commission heretofore authorized the multiple complet		38E		
			maripic completio	n or a wen	in these same poors or in the	
same zones within one mile of the s 2. If answer is yes, identify one such in	ubject well? YES X	NO	Operator League	and Wall No	. Warren Unit 46	
2. If answer is yes, identify one such if	istance: Order No. <u>190-2</u>	,	Operator, Lease,	and well in		
3. The following facts are submitted:	TY		Intermediate		Lower	
o. The lone wing laces are desimilar	Upper Zone		Zone		Zone	
a. Name of Pool and Formation	Blineberry Oil	& Gas			Warren Tubb	
b. Top and Bottom of	<u> </u>		······································			
Pay Section	5920'-6220'				6560'6720'	
(Perforations)	3,20 0220					
c. Type of production (Oil or Gas)	011				Oil	
d. Method of Production				· · · · · ·		
(Flowing or Artificial Lift)	Artificial Lift				Artificial Lift	
4. The following are attached. (Please mark YES of NO)						
operators of all leases offs	ch multiple completion from es of the application.* or other acceptable log with available at the time application which this well is located. Bldg., Hobbs, New	n each offset of ith tops and bot lication is filed ited together win Mexico 887	toms of producing t, it shall be subm	thereof, evi	ovided by Rule 112-A.)	
Gulf Oil Corporation, E	Box 670, Hobbs, New	w Mexico 88	3240	 		
** Will Follow						
NIMOOD Comba Ha (O) NI	(OD H-11 - (O) F	. 1 _				
NMOCD - Santa Fe (2) NM			1'' 1 VEC	V NO	Y	
6. Were all operators listed in Item 5 at		a copy of this	application? YES	_A_ NU _	. It answer is yes, give date	
of such notification11-15-78		•				
CERTIFICATE: I, the undersigned,	state that I am the Dis	ricion Mose	agar -	of the Co	untinontal Oil Composer	
			_			
(company), and that I am authorized by said company to make this report; and that this report was prepared under my supervision and direction and that the facts stated therein are true, correct and complete to the best of my knowledge.						
ander my supervision and direction and	mat the facto Stated theret	are due, com			or my amourouge.	
			11110	1100	CADE_	
			1/1/1/100	Signatu	re	
* Should waivers from all offset o	netators not accompany on	application for	V administrative on	ntowal the	New Mexico Oil Conservation	
Commission will hold the applic						
			_		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.