SANTA FE, NEW MEXICO

APPLICATION FOR MULTIPLE COMPLETION

O _{perator} Continental Oil Company - Address		County	ea	Date 11-15-78 Well No.	
		1_ease			
P. O. Box 460, Hobbs	s, New Mexico 8824	0 Wa	rren Unit	52	
	Section	Township		Range	
or Well I	29		.0S	38E	
1. Has the New Mexico Oil Conservation			tiple completion o	of a well in these same pools or in the	
same zones within one mile of the such in If answer is yes, identify one such in			erator, Lease, and	d Well No.: <u>Warren Unit 47</u>	
6. The following facts are submitted:	Upper Zone	·	Intermediate Zone	Lower Zone	
a. Name of Pool and Formation	Blineberry Oil &	Gas		Warren Tubb	
5. Top and Bottom of					
Pay Section	5813'-6089'			6466'-6656'	
(Perforations)					
c. Type of production (Gil or Gas)	0i1	<u></u>		Oil	
d. Method of Production				∫	
(Flowing or Artificial Lift) 4. The following are attached. (Please	Artificial Lift			Artificial Lift	
	or other acceptable log wing available at the time apple on which this well is local Bldg., Hobbs, New we, Hobbs, New Mex	ication is filed, it ted together with t Mexico 88240	: shall be submitte their correct maili)	nes and intervals of perforation indicated ed as provided by Rule 112-A.) ng address.	
** Will Follow NMOCD - Santa Fe (2) N	MOCD - Hobbs (2) F	File			
5. Were all operators listed in Item 5 about of such notification 11-15-78	ove notified and furnished	a copy of this app	lication? YES	X_NO If answer is yes, give date	
CERTIFICATE: I, the undersigned,		Ision Manager	*	heContinental Oil Company eport; and that this report was prepared	
under my supervision and direction and the	hat the facts stated therein		11 10		
			The Co	MARO.	
		application for add	ministrative appro	Signature val, the New Mexico Oil Conservation he Commission's Santa Fe office. If,	

after said twenty-day period, no process 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 UNET, WELL NO. 52 PROPOSED COMPLETION EQUIPMENT

1. 1 ST. 2% BUTTRESS TEG O.E. 2. Tues S.N. - BUTTRESS 23" BUTTRESS TEG. X- OUER 23 BUTT X EUE 8 VENT HEAD ASSY. PKR OTIS "W3" @ 6400' 95/8", 34 #/Ft CS40 X-OUER 2% BUTT. X ELE X: 238" BUTTRESS TBG. 1382' W/550 St. X-OVER 238"BUTT. XEUE TRIPLE STRING ANCHOR X-OVER 28" BUTT X EUE: 2%" BUTTRESS TBG. II. X-OUER 2%"BUTT x EUES BLINEBRY PERFS 12. J- LATCH ASSY. 13 13. X-OVER 21/2"BUTT X EUE! 5812'- 6087' 14. BLINESRY S.N. - SUTTRESS 2%" BUTTRESS TBG. 16. X-OVE 278"BUTT. x EILE8 17. STINGER COLLET 18. 14" 10rd II TBG. 19. X-OUER 10 MIJ 16 x 10 md. NOTE TO BE LOCATED BELOW BOHJM BLINEBRY PERFS TUBB PERFS $\leftarrow \otimes$ 6468'- 6717' 7", 26" xt K-55 csg. @ 6788' WI 1825 SX. T.D.- 6788'

SANTA FE, NEW MEXICO

APPLICATION FOR MULTIPLE COMPLETION

Operator Communication 1 011 Communication		County	Date 11 15 70	
Continental Oil Com	pany -	Lea	11-15-78 Well No.	
Address	a Nov. Morrido 887/4	Lease) Warren Unit	52	
P. O. Box 460, Hobb	Section	Township	Range	
or Well I	29	20S	38E	
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same zones within one mile of the s 2. If answer is yes, identify one such in	ubject well? YES X	NO		
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b. Top and Bottom of				
Pay Section	5813'-6089'		6466'-6656'	
(Perforations)				
c. Type of production (Oil or Gas)	Oil		Oil	
d. Method of Production			A	
(Flowing or Artificial Lift) 4. The following are attached. (Please	Artificial Lift		Artificial Lift	
	or other acceptable log with the survey with the survey with the survey with the survey with the survey. The survey was acceptable to the survey with the survey was acceptable to the survey with the survey with the survey with the survey was acceptable to the survey with the survey wit	ication is filed, it shall be submitted together with their correct material Mexico 88240	zones and intervals of perforation indicated itted as provided by Rule 112-A.) ailing address.	
	MOCD - Hobbs (2) F		_X_NO If answer is yes, give date	
of such notification 11-15-78 CERTIFICATE: I, the undersigned,	Divi	eion Manager	of theContinental Oil Company	
(compunder my supervision and direction and t		are true, correct and complete t	s report; and that this report was prepared to the best of my knowledge.	
		- (/ 220	Signature	
			proval, the New Mexico Oil Conservation y 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.

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