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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISS. J
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

Operator
CONTINENTAL OIL COMPANY

Address
Box 460, Hobbs, NM 88240

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:

Recompletion Oil Dry Gas

Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name WARREN UNIT TUBB	Well No. 57	Pool Name, including Formation Warren Tubb O, 1	Kind of Lease State, <input checked="" type="checkbox"/> Federal or Fee <input type="checkbox"/>	Lease No. LC063458
Location Unit Letter D : 660 Feet From The NORTH Line and 660 Feet From The WEST				
Line of Section 26 Township 20-S Range 38-E , NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Shell Pipeline Company	Midland, TX			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Warren Petroleum	Monument, NM			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 33	Twp. 20	Rge. 38
	Is gas actually connected? yes		When 4-13-79	

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input type="checkbox"/>
Date Spudded 2-3-79	Date Compl. Ready to Prod. 3-24-79		Total Depth 6820		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3559.5 GR	Name of Producing Formation Warren Tubb		Top Oil/Gas Pay 6660		Tubing Depth 6673			
Perforations 660, 66, 76, 82, 84, 96, 99, 6703, 11, 14, 19, 21, 26 w/1 JSPT					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	9 5/8"	1550	600 sx
8 3/4	7"	6520	550 sx cive
	2 3/8"	6705	

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 3-24-79	Date of Test 4-13-79	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 29	Water - Bbls. 4	Gas - MCF 105

Gravity 360

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

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.

Ben A. Lee
 (Signature)
 Administrative Supervisor

 (Title)
4-19-79
 (Date)

OIL CONSERVATION COMMISSION

APPROVED **APR 25 1979**, 19____
 BY **Les Clements**
 Orig. Signed by
Oil & Gas Insp.

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.

17700 D(5), USGS(5), NMFCU(4), File

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APR 23 1979

**OIL CONSERVATION COMM.
HOODS, N. H.**