

NEW XICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
(Revised 7/1/52)

REQUEST FOR (OIL) • (GAS) ALLOWABLE

RECOMPLETION

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Hobbs, New Mexico

June 20, 1956

(Place)

(Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

Continental Oil Company

Meyer B-9

Well No. 2

SE

1/4

NW

1/4

(Company or Operator)

(Lease)

F

Sec. 2

T. 21S

R. 36E

NMPM,

Unice

Pool

Unit Letter

County. Date Spudded

Date Completed

11-17-55

Please indicate location:

D	C	B	A
E	F K	G	H
I	K	J	I
M	N	O	P

Elevation 3558

Total Depth 3870

P.B. 3786

Top gas pay 3305

Name of Prod. Form Queen

Casing Perforations: 3365-3425, 3522-3570

or

Depth to Casing shoe of Prod. String

Natural Prod. Test

BOPD

based on

bbls. Oil in

Hrs.

Mins.

Test after acid or shot

BOPD

Based on

bbls. Oil in

Hrs.

Mins.

Gas Well Potential 3,650 (Calculated Open-Flow Potential)

Size choke in inches Open

Date first oil run to tanks or gas to Transmission system:

Transporter taking Oil or Gas:

Casing and Cementing Record

Size Feet Sax

Remarks: Well dually completed in Grayburg for oil and Queen for gas.

I hereby certify that the information given above is true and complete to the best of my knowledge.

Approved _____, 19 _____

Continental Oil Company

(Company or Operator)

By: _____

(Signature)

Title

District Superintendent

Send Communications regarding well to:

Name

Continental Oil Company

Address

Box 127, Hobbs, New Mexico

OIL CONSERVATION COMMISSION

By: _____

Title