NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

# REQUEST FOR (OIL) - ~~(GAS)~~ ALLOWABLE

New Well
~~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.

Eunice, New Mexico    7-17-56
(Place)                              (Date)

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

Continental Oil Co    Lockhart B-11 , Well No. 13-TB , in SE ¼ SE ¼,
(Company or Operator)    (Lease)

P , Sec. 11 , T. 21 S , R. 37 E , NMPM., Terry Blinebry Pool
(Unit)

Lea County. Date Spudded 6-15-56 , Date Completed 7-4-56

**Please indicate location:**

| | | | |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | X |

Elevation 3439' Total Depth 5900' , RB DOD 5897'

Top oil/gas pay 5704' Name of Prod. Form. Blinebry

Casing Perforations: 5704-41' 5756-98' 5829-83' or

Depth to Casing shoe of Prod. String -- 

Natural Prod. Test -- BOPD

based on -- bbls. Oil in -- Hrs -- Mins.

Test after acid or shot 248 BOPD

Based on 62 bbls. Oil in 6 Hrs -- Mins.

Gas Well Potential --

Size choke in inches 30/64

Date first oil run to tanks or gas to Transmission system: 7-15-56

Transporter taking Oil or Gas: Texas-New Mexico Pipe Line Co

**Casing and Cementing Record**

| Size | Feet | Sax |
|---|---|---|
| 8 5/8 | 1400 | 750 |
| 5 1/2 | 5899 | 3200 |
| | | |
| | | |

Remarks: LC 032096 b

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

Approved JUL 19 1956 , 19

OIL CONSERVATION COMMISSION

By:

Title
Engineer District 1

(Company or Operator)
By:
(Signature)

Title District Superintendent
Send Communications regarding well to:

Name W E Allen

Address Box 68, Eunice, New Mexico