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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

I.

Operator CONTINENTAL OIL COMPANY	
Address BOX 460 HOBBS, NEW MEXICO	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name LOCKHART A-17	Well No. 3	Pool Name, including Formation PENROSE SKELLY GRAYBURG	Kind of Lease LC-032096(2)	Lease No.
Location				
Unit Letter H	Feet From The 1920	Line and NORTH	Feet From The 660	County LEA
Line of Section 17	Township 21S	Range 37E	NMPM, LEA	

III. 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 PIPE-LINE CO	INTO CITIC OIL COMPANY
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)
SKELLY OIL CO.	MIDLAND, TEXAS
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit H Sec. 17 Twp. 21 Rge. 37	YES

EFFECTIVE JANUARY 31, 1977,
SKELLY OIL COMPANY MERGED
INTO CITIC OIL COMPANY.

If this production is commingled with that from any other lease or pool, give commingling order number: **NMOC - PC - 90**

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v.	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
		6645'	9530'					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3483 DF	GRAYBURG		3820'					
Perforations	Depth Casing Shoe							
3727', 33', 43', 52', 59', 64', 70', 73' w/1 JSPE	6645'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 6-26-72	Date of Test 6-30-72	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. 40	Water - Bbls. 5	Gas - MCF 134

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

VI. 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

Robert Garrett III
(Signature)

ADMINISTRATIVE SUPERVISOR
(Title)

6-30-72
(Date)

NMOC(5) NMFC(4)

OIL CONSERVATION COMMISSION

APPROVED **JUN 30 1972**, 19
BY **[Signature]**
TITLE **SUPERVISOR DISTRICT I**

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.