NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Form C-110
Revised 7/1/55

(File the original and 4 copies with the appropriate district office)

CERTIFICATE OF COMPLIANCE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company or Operator Continental Oil Company Lease E. H. Wantz

Well No. 4-M Unit Letter O S 21 T 21 S R 37 E Pool Wantz Abo

County Lea Kind of Lease (State, Fed. or Patented) Patented

If well produces oil or condensate, give location of tanks: Unit K S 20 T 21 S R 37 E

Authorized Transporter of Oil or Condensate Texas-New Mexico Pipeline Company

Address Box 1510 - Midland, Texas

(Give address to which approved copy of this form is to be sent)

Authorized Transporter of Gas Skelly Oil Company

Address Box 1138 - Eunice, New Mexico

(Give address to which approved copy of this form is to be sent)

If gas is being sold, give name and address of purchaser

Reasons for Filing: (Please check proper box) New Well ( )

Change in Transporter of (Check One): Oil ( ) Dry Gas ( ) C'head ( ) Condensate ( )

Recompletion (X)

Other (Give explanation below)

Recompletion. Well plugged back from Brunson Pool and recompleted in the Wantz Abo Pool effective 10-16-58. Formerly W. S. Wantz No. 1, Brunson Pool.

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.

Executed this the 21st day of October, 19 58

By [signature]

Title District Superintendent

OIL CONSERVATION COMMISSION

By [signature]

Title

Company Continental Oil Company

Address Box 68

Eunice, New Mexico

, 19

NEW XICO OIL CONSERVATION COMM ON
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

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 new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Eunice, New Mexico (Place) October 20, 1958 (Date)

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

Continental Oil Company (Company or Operator) M. E. Wantz (Lease), Well No. 4-A, in SW ¼ SE ¼

O (Unit Letter), Sec. 21, T. 21 S, R. 37 E, NMPM., Wantz Abo Pool

Lea County. Date ~~Spudded~~ Started 10-13-58 Date ~~Drilling~~ Completed 10-15-58

Elevation 3459' DF Total Depth 8270' PBTD 7790'

Top Oil/~~Gas~~ Pay 7130' Name of Prod. Form. Abo

PRODUCING INTERVAL -

Perforations 7130-7235'.

Open Hole - - - - Depth Casing Shoe 8265' Depth Tubing 7220'

OIL WELL TEST -

Natural Prod. Test: _____ bbls.oil, _____ bbls water in _____ hrs, _____ min. Choke Size_____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 85 bbls.oil, 0 bbls water in 7 hrs, - - min. Choke Size 15/64"

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size_____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed_____

Choke Size_____ Method of Testing: _____

Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 8,000 gallons 15% Acid.

Casing Press. 1,000# Tubing Press. 300# Date first new oil run to tanks 10-16-58

Oil Transporter Texas-New Mexico Pipeline Company

Gas Transporter ~~Gulf~~ Skelly Oil Company

Please indicate location:

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
13 3/8	216'	200
9 5/8	2740'	500
7	8265'	900

Remarks: well plugged back from Brunson Pool and recompleted in the Wantz Abo Pool. Formerly M. E. Wantz No. 1 Brunson Pool.

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

Approved _____, 19____

OIL CONSERVATION COMMISSION

By: _____

Title _____

Continental Oil Company (Company or Operator)

By: _____ (Signature)

Title District Superintendent

Send Communications regarding well to:

Name B. S. Parker

Address Box 68 - Eunice, New Mexico