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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-110
Effective 1-1-65

OCT 15 11 25 AM '65

I. Operator
Continental Oil Company
Address
Box 460, Hobbs, New Mexico
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lockhart A-30	Well No. 11	Pool Name, including Formation Eumont	Kind of Lease State, Federal or Fee Federal
Location Unit Letter K, 1980 Feet From The South Line and 1650 Feet From The West Line of Section 30, Township 21S Range 36E, NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipe Line Co.	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Continental Carbon Company	Address (Give address to which approved copy of this form is to be sent) 1400 W. 10th - Amarillo, Texas		
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 30	Twp. 21S
	Rge. 36E	Is gas actually connected? When Yes 10-10-65	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 8-13-65	Date Compl. Ready to Prod. 10-8-65		Total Depth 3971'		P.B.T.D.			
Pool Eumont	Name of Producing Formation Seven Rivers		Top Oil/Gas Pay 3848'		Tubing Depth 3854'			
Perforations 3848, 3860, 3869, 3874, 3881, 3888, 3915, 3919, 3922, 3966		& 3940		Depth Casing Shoe 3971				
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 11 6 3/4	CASING & TUBING SIZE 7 5/8 4 1/2		DEPTH SET 370 3971		SACKS CEMENT 229 200			

V. 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 10-8-65	Date of Test 10-9-65	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure -	Casing Pressure -	Choke Size Open
Actual Prod. During Test 18	Oil-Bbls. 18	Water-Bbls. 43	Gas-MCF 71

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure	Casing Pressure	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.

W. R. Stephens
(Signature)
Staff Supervisor
(Title)

October 14, 1965
NMOCC-5, USGS-2 (Date) Atl Ros-3
Pan Am -3 Calif Mid-3 File 2

OIL CONSERVATION COMMISSION

APPROVED _____, 19____
BY James
TITLE _____

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 Sections I, II, III, and VI only 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.