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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
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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

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

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Hawk A</b>	Lease No. <b>6</b>	Well No. <b>Drinkard</b>	Pool Name, including Formation <b>Lea</b>	Kind of Lease State, Federal or Fee <b>Federal</b>
Location Unit Letter <b>G</b> ; <b>1980</b> Feet From The <b>North</b> Line and <b>1980</b> Feet From The <b>East</b> Line of Section <b>8</b> Township <b>21S</b> Range <b>37E</b> , NMFM, County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> X or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<b>Texas New Mexico Pipeline Company</b>	<b>Box 1510, Midland, Texas</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> X or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<b>Skelly Oil Company</b>	<b>Box 1135, Eunice, New Mexico</b>
If well produces oil or liquids, give location of tanks.	Unit: <b>A</b> Sec. <b>8</b> Twp. <b>21S</b> Rge. <b>37E</b> Is gas actually connected? <b>Yes</b> When <b>3-24-66</b>

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"/> X	Gas Well	New Well <input checked="" type="checkbox"/> X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded <b>2-7-66</b>	Date Compl. Ready to Prod. <b>3-15-66</b>	Total Depth <b>6819</b>	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) <b>3546 DF</b>	Name of Producing Formation <b>Drinkard</b>	Top Oil/Gas Pay <b>6678</b>	Tubing Depth <b>2 3/8" @ 6670</b>					
Perforations <b>6678, 6683, 6691, 6698, 6703, 6709, 6714, 6724 w/1 JSPH</b>		Depth Casing Shoe <b>5 1/2" @ 6819</b>						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
<b>12</b>	<b>8 5/3 24" J-55</b>		<b>1230</b>		<b>600 bx C1 "C"</b>			
<b>6 3/4</b>	<b>5 1/2 14" J-55</b>		<b>6819</b>		<b>640 bx C1 "C"</b>			
	<b>2 3/8" tubing</b>		<b>6670</b>					

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 <b>3-13-66</b>	Date of Test <b>3-24-66</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Flowing</b>	
Length of Test <b>24</b>	Tubing Pressure <b>75</b>	Casing Pressure <b>28</b>	Choke Size <b>28/64</b>
Actual Prod. During Test <b>59</b>	Oil - Bbls. <b>56</b>	Water - Bbls. <b>3</b>	Gas - MCF <b>144</b>

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.

*Hal R. Stephens*  
(Signature)

Staff Supervisor

(Title)

3-28-66

NUCCO-3, PAN AM ROUTE, 3, AND BOX-2,  
CALIF MOD 2, LPT.

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY \_\_\_\_\_

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 only Sections I, II, III, and VI 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.

HOBBS OFFICE O. C. C.

RECEIVED MAR 29 11 44 AM '66

File # 460,  
Hobbs, New Mexico

3-28-1966

New Mexico State Oil & Gas Commission  
200 North 2nd Street  
Albuquerque, New Mexico

Dear Sirs:

Reference is made to New Mexico Oil & Gas Conservation  
Commission Rule 11, which requires filing of a list of deviation  
surveys made in the oil and gas field of division  
No. 6, located in G. Section 8-21-37.  
The following is the list of

WELL NO.	DEPTH	DATE	REMARKS
719	1/4	5210	3/4
918	1/2	5539	1
1330	1/2	5740	1
1850	1/2	6126	3/4
2160	3/4	6462	1
2400	1 1/2	6671	3/4
2703	1 3/4		
2957	1 1/4		
3360	1		
3685	1		
4391	3/4		
4548	1		
4855	1		

Very truly yours,

3 Enclosed as required by Rule 11, New Mexico Oil & Gas Conservation Commission, New Mexico, dated 28 March 1966.

*John E. Rachel*  
New Mexico