

NUMBER OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO
**CERTIFICATE OF COMPLIANCE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

FORM C-110
(Rev. 7-60)

FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE

Company or Operator **Continental Oil Company** Lease **1961 JUN 22 PM 1 17-21p.**
Stevens B-15 **3**

Unit Letter **N** Section **15** Township **23-S** Range **36-E** County **Lea**

Pool **Langlie Mattix** Kind of Lease (State, Fed, Fee) **Federal**

If well produces oil or condensate give location of tanks Unit Letter **N** Section **15** Township **23-S** Range **36-E**

Authorized transporter of oil or condensate Address (give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipe Line Company **P. O. Box 1510, Midland, Texas**

Is Gas Actually Connected? Yes No

Authorized transporter of casing head gas or dry gas Date Connected Address (give address to which approved copy of this form is to be sent)

If gas is not being sold, give reasons and also explain its present disposition:
No market - gas vented.

REASON(S) FOR FILING (please check proper box)

New Well Change in Ownership
Change in Transporter (check one) Other (explain below)
Oil Dry Gas
Casing head gas . . . Condensate . . .

Remarks
O/L NMCC WAM SW File

The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with.
Executed this the **20th** day of **June**, 19 **61**.

OIL CONSERVATION COMMISSION	By
Approved by <i>Leslie A. Clement</i>	<i>J. Blank</i>
Title	District Superintendent
	Continental Oil Company
Date	Box 68, Eunice, New Mexico

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

New Well
~~XXXXXXXXXX~~

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 QUADRUPPLICATE 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 June 20, 1961
(Place) (Date)

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

Continental Oil Company Stevens B-15, Well No. 3, in SE $\frac{1}{4}$, SW $\frac{1}{4}$,
(Company or Operator) (Lease)
N, Sec. 15, T. 23-S, R. 36-E, NMPM, Larglie Mattix Pool
Unit Letter

Lea County. Date Spudded 4-29-61 Date Drilling Completed 5-15-61
Elevation 3399' KB Total Depth 3695' PBTD _____

Please indicate location:

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

Top Oil/Exp Pay 3642' Name of Prod. Form. Seven Rivers

PRODUCING INTERVAL -

Perforations 3642-47', 3678-80' w/l. bullets per ft.

Open Hole _____ Depth _____ Casing Shoe 3694' Depth _____ Tubing 3499'

OIL WELL TEST -

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

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 10 bbls. oil, 5 bbls water in 24 hrs, _____ min. Size 38/64" Choke

GAS WELL TEST -

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

Tubing, Casing and Cementing Record

Size	Feet	Sax
11 3/4	326	300
4 1/2	3682	400
2 7/8	3487	

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): See remarks

Casing Tubing Date first new _____
Press. 650 Press. 150 oil run to tanks 6-1-61

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter _____

Remarks: Treated w/1000 gals. 15% LSTNE FOLLOWED by 10,000 gal. frac using 15,000 lbs. sand and 500 lbs. "Adomite" in two equal stages w/15 ball sealers.

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

Approved _____, 19_____

Continental Oil Company
(Company or Operator)

OIL CONSERVATION COMMISSION

By J. R. Parker
(Signature)

By: Leslie A. Clement

Title: District Superintendent
Send Communications regarding well to:

Title _____

Name: J. R. Parker