-2. 00 C20:C3 0ECE:VE2	<del></del>		
DISTRIBUTION			
		CONSERVATION COMMISS	Form C-134
SANTAFE	REQUEST	FOR ALLOWABLE	Superseaes 012 C-144 and C-1 Effective 1-1-35
FILE :	<del>_</del>	AND	
U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS
OIL			
TRANSPORTER GAS			
OPERATOR			
PROPATION OFFICE	<del></del>		
Operator			
Conoco Inc.			
Agiress			
P.O. Box 46	00, Hobbs, New Mexico 88	240	
Reason(s) for tiling (Creen proper t		Other (Please explain)	
New Well	Change in Transporter of:	Change of corpor	rate name from
Recompletion	OII Dry (		Company effective
Change in Ownershipi	Castnahead Gas Cond	ensate 🗌 July 1, 1979.	
If change of ownership give name	•		
and address of previous owner	DIFTER		
. DESCRIPTION OF WELL AN	1) L.F.ASE.  Aetl No., Poor Name, Including	Formation Kind of Leas	Se Lease No.
State 11-36	1 Blinebry	OIL4 Gas State, Feder	
Pacation 7/9/46 77 70	1 0 11110010		
	980 Feet From The N	ine and <u>2030</u> Feet From	The E
Line of Section 36	Township 22-5 Range	37-6 , NMPM,	Lea County
DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of	or Condensate 🔀	Address (Give address to which appro	oved copy of this form is to be sent)
Permian (orn.		Midland.TX	
Name of Authorized Transporter of	Casinghead Gas or Dry Gas 🔀	Address (Give address to which appro	oved copy of this form is to be sent)
Gett. Oil Co		Eunice, NM	
eleng on w.	Unit   Sec. Twp.   Ege.		hen
If well produces oil or liquids, give location of tanks.	G 36 22 37	yes	10-19-73
If this production is commissied	with that from any other lease or poo	L give commingling order number:	
COMPLETION DATA	with that from any other rease or poo		
	Cil Well Gas Well	New Weil Workover Deepen	Plug Back   Same Resty, Diff. Rest
Designate Type of Comple	$\operatorname{stron} = (X)  ;  \vdots  \vdots$	1	1
Date Spudded	Date Compi. Reday to Prod.	Total Depth	P.B.T.D.
	;		
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Otl/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
*			
	TUBING, CASING, A	ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			<del>_</del>
			<del></del>
. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be	after recovery of total volume of load of	l and must be equal to or exceed top allo
OIL WELL	able for this	depth or be for full 24 hours)  Producing Method (Flow, pump, gas	lift etc.)
Date First New Oil Run To Tanks	Date of Test	Freddeling Wallion (1 tow, pump, gas	
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Charle Steagne	
	00-28-	Water-Bbis.	Gge-MCF
Actual Prod. During Test	Cil-Bbis.		
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
1			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
		3 3333	A TION COLUMNS ION
I. CERTIFICATE OF COMPLI	ANCE	OIL CONSERV	ATION COMMISSION
		APPROVED 111 20	1979 // 19
I hereby certify that the rules a	nd regulations of the Oil Conservation		1.14
<ul> <li>Commission have been complied above is true and complete to</li> </ul>	d with and that the information give the best of my knowledge and belie	BY	Up con
			pervisor
Ar = 1	-	TITREUISTRICT_30	
1/1/21/.	n Pla		compliance with RULE 1104.
		If the in a sequent for all	

.

(Signature) Division Manager.

(Title)

(Date)

MMOCD (5) FILE

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 weils.

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.

## RECEIVED

JUN2 2 1979
OIL CONSERVATION COMM,
HOBBS, N. M.

NO. OF COPIES RECEIVED			Form C-103 Supersedes Old
SANTA FE	NEW MEXICO OIL CON	SERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
U.S.G.S.	•		5a, Indicate Type of Lease
LAND OFFICE	•	,	State X Fee 5. State Oil & Gas Lease No.
OPERATOR	•		E-8017
IDO NOT USE THIS FORM YOU PROP	NOTICES AND REPORTS ON	BACK TO A DIFFERENT RESERVOIR.	
1. OIL GAS 🔽	N FOR PERMIT -" (FORM C-101) FOR SU	CH PROPOSALS.)	7. Unit Agreement Name
2. None of Operator	OTHER-		8. Farm or Lease Name
Continental 3. Address of Operator	Oil Compan	4	State JJ-36 9. Well No.
Box 460, Hol	665, N.M. 88	1240	10. Field and Pool, or Wildcat
4. Location of Weil UNIT LETTER 6 . 196	10 FEET FROM THE North	LINE AND 2030 PEET P	Rlinghan GAC
THE East LINE, SECTION	36 TOWNSHIP 22-	SRANGE 37-ENM	IPM.
	15. Elevation (Show whether	r DF, RT, GR, etc.)	12. County
	331	5' DF	LEA MILLINI
Check A	ppropriate Box To Indicate I		Other Data ENT REPORT OF:
		,	
PERFORM REMEDIAL-WORK	PLUG AND ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASING PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CABING TEST AND CEMENT JOS	
	_	OTHER	zir Casing X
OTHER	PHILLER THE AC PORT	'  MANDREL - ATTEMPTEI	ding estimated date of starting any proposed
work) SEE RUISES 9. STU	ICK WORK STRING. L	EFT CROSSOVER SUB	TAPER TAP &
3-23-76 PKR IN HOLE 7-1-76 7-5/8*/4-1/			25 SKS CMT IN CULATED 300 SKS
CMT TO PIT.			EZED W 750 SKS
CLASS "C" T	THIX-SET, 3% CA CL	& 1/2#/SK FLOCELE	& 100 SKS CLASS
"C" CMT, 2%	CA CL & 3#/SK SAL' -2003 W/100 SKS H	T. DISPLACED W/25	13% SALT. & 100
SKS CLASS "	"C" CMT, 2% CA CL &	3#/SK SALT. TAGG	ED CMT AT 1926 .
DO TO 2010	. TESTED TO 1000#	. RELEASED RIG 4-	6-76. MIRU X-PERT
4-19-76. T	FISHED TAPER TAP, SECOVERED. TESTED P	ERFS 2590 4-92 4 2	350'-62' & 2000'-
02 TO 500	. SQUEEZED PERFS	V/40 SKS CLASS "C"	CMT, 5#/SK KCL,
- 65 HALAD 2	22 AT 14.8 PPG. AI	R 1/2 BPM AT MP 20	00#• CO CMT•
\$PO TTED 250	GALS 15% NE-HCL A -5 BPM. SQUEEZED P	FRES WALSO SKS CLA	SS "C" CMT, 2%
CA Ct . 3#/	SK SALT. 1/4#/SK FL	OCELE. DO CMT 1701	0 '- 2015 '•
DIEDIACED (	ANIMIT IIS WATER. RFL.	FASED RIG 5-1-76.	MIRU DA&S 6-8-76.
ATTEMPTED	TO RIN RBP. STOPPE 5% NE-HCL ACID AT 5	D AT 1839 . UU IU	2020 - SFOTTED
500 GALS 11	DISPLACED ANNULUS	W/TFW. SET PKR AT	5450 . SWBD WFLL
18. I hereby certify that the information	CED . L'An Crus To bulga Le fine 121.	OBWABBINGHUNT 6-1	6-76. SWBD WELL IN.
SIGNED WAY OF BUT	The L	ADMIN. SUPY.	DATE 5-17-77
APPROVED BY	TITLE		DATE
CONDITIONS OF APPROVAL, IF ANY:	NMOCC (4)	File	

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CIT COMPY COMPY

NO. OF COPIES RECEIVED		•	Ferm C-103	
DISTRIBUTION			Supersedes Old C-102 and C-10	
SANTA FE	NEW MEXICO OIL CON	SERVATION COMMISSION	Effective 1-1-6	
FILE				
U.S.G.S.			5a. Indicate Type	
LAND OFFICE			State Oil & Gas	Fee
OPERATOR			E-80	17
CLIN	IDRY NOTICES AND REPORTS OF	NWELLS	minim	
(DO NOT USE THIS FORM FOR USE **APPLI		N TILLU BACK TO A DIFFERENT RESERVOIR. JCH PROPOSALS.)	7. Unit Agreement	Name
1.  OIL GAS WELL  2. Name of Operator	OTHER-		8. Farm or Lease	Name
Continental Oil	Company		STATE 9. Well No.	DD-36
P. O. Box 460, H	obbs, New Mexico 882	40	1	
4. Location of Well			10. Field and Poo	
UNIT LETTER	PEET FROM THE	LINE AND 2030 FEET FAC	BLINEB	
THELINE, SI	ECTION 36 TOWNSHIP 2	S RANGE 37E NMP		
	15. Elevation (Show wheth		12. County	11111111
	33/5' D	F	LEA	
	ck Appropriate Box To Indicate FINTENTION TO:		ther Data NT REPORT OF:	
<del></del>	·		A1758	ING CASING
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK  COMMENCE DRILLING OPNS.		ND ABANDONMENT
TEMPGRARILY ABANDON  PULL CR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOS		
_	a CACIALO	OTHER		
•	R CASING S			
17. Denotibe Proposed of Complete work) SEE RULE 1903.	ed Operations (Clearly state all pertinent d	letails, and give pertinent dates, includi	ng estimated date of :	starting any proposed
	LEAK IS SUSPE	CTED IN THIS	Wer Ta	- T-
PRABASED 7	Total ATT 150	a depart of		43
TROPOSED 10	ISOLATE LEAD	K & NETHIN HS	toccou	V5:
SET PKR. A.	7 2400' & PRES	S. TEST ANNULU	15 75 CA	JECK IF
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				1THER
	(FS AT 2390-92	'OR 2350-50'	ر د سروس لمصر ا	
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150LATE WI	B.P. & PKR.OF	'OR 2350-52' RETAINER A	ARE LE	EAXING,
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ONE OF SET ON A SET OF	STATE JJ-36  ONTINENTIAL OIL COMPANY  STATE JJ-36  STATE	USE "APPLICAT!	ON FOR PERMIT - " (FORM C-101) FOR SUCH	PROPOSALS.)	7. Unit Agreement Name
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BOX 460 HOBBS, N.M. 88240  LLOCATION OF WILL  ENTRE CETTER G. 1980 HE PROS. N.M. 88240  LLOCATION OF WILL  ENTRE CETTER G. 1980 HE PROS. N.M. 88240  LLOCATION OF WILL  THE CETTER G. 1980 HE PROS. N.M. 15. Elevation (Show whether DF. RT. GR. 190.)  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  WERE DAM REVIOLAL WORK  PLUS BAND ADARDON  TEMESIAL WORK  CHARGE FLAND  CHARGE FLAND CHARGE MARKET AND EXCENT LOS FLAND ADARDON  TOWN CHARGE FLAND  CHARGE FLAND CHARGE MARKET AND FLAND ADARDON  CHARGE FLAND  CHARGE FLAND CHARGE MARKET AND FLAND ADARDON  CHARGE FLAND  CHARGE CHARGE CHARGE AND ADARDON  CHARGE FLAND  CHARGE FLAND  CHARGE FLAND  CHARGE CHARGE CHARGE AND ADARDON  CHARGE FLAND  CHARGE CHARGE CHARGE AND ADARDON  CHARGE FLAND  CHARGE CHARGE CHARGE AND CHARGE	ACTION OF THE PROPOSED OF SOLIT SOLI	2. Segre of Operator			8. Farm or Lease Name
BOX 460 HOBBS, N.M. 88240  LLOSTION OF VOID  ENTRETE G. 1980 FEET FROM THE NORTH LINE AND 2030 FEET FROM  THE CARET LIME, RECTION 36 FOOTHWATER PLANE 37.E THOMAS THE AND SHOP FREE FROM THE SHOP FREE FROM THE SECTION TO:  Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  REMFORM REMEDIAL WORK  FILL OR ALTER CRISTS  OTHER SHAPES CARINS  THE GRANDE FLANE  CHANGE FLANE  CHAN	ACTION OF THE PROPOSED OF SOLIT SOLI	CONTINENTAL DIE	(DMPANY		STATE UJ-36
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17. Describe Proposed of Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.  IN order to Satisfy NMOCC requirements and to Shut off winter flaw, the following work is proposed: Run TOL log from Sfc. to Soon to the following work is proposed: Run TOL log from Sfc. to Soon to locate water entry. Set Bridge Plug So below who entry zone w/20 sone on top. Set pkr 150' above water entry zone & perf. W/4 shots over 2' on top. Set pkr 150' above water entry zone. Squeeze comt w/50 sks Class interval 5'-10' above water entry zone. Squeeze comt w/50 sks Class interval 5'-10' above water entry zone. Squeeze comt w/50 sks Class interval 5'-10' above water entry zone. Squeeze comt w/50 sks Class interval 5'-10' above water entry zone. Squeeze comt w/50 sks Class interval 5'-10' above water entry zone. Squeeze comt w/50 sks Class interval 450 sks Comt. Bohind csq. anticipaled to be 1 3300'. Squeet total 450 sks. Class interval 650 sk	17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.  IN order to Satisfy NMOCC requirements and to Shut off Uniter Plans  The following work is proposed: Run TDL log from Sfe. to Sood to the following work is proposed: Run TDL log from Sfe. to Sood to locate wo for entry. Set Bridge Plug So below who entry zone w/20'SON locate wo for entry. Set Bridge Plug So below who entry zone w/20'SON locate wo for 150' above water entry zone. Squeeze comt w/so sks Class complete on the solid complete of the set of my knowledge and belief.  15. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  15. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  15. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  15. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  16. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  16. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  16. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  16. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  16. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  16. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.  16. I hereby certain that proformation above is true and complete to the best of my knowledge and belief.	PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
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