DISTRIBUTION	REQUEST FO	NSERVATION COMMISSIC OR ALLOWABLE	Form C-104 Supersedes Old C-104 and C-110 Elfective 1-1-65
U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		GAS
LAND OFFICE			
TRANSPORTER GAS			
OPERATOR			
PRORATION OFFICE Operator			
Continental Oil Company			
POBOX 460, Hobbs New Mexico			
Reason(s) for filing (Check proper box)	10071020	Other (Please explain)	
New Weil Change in Transporter of: Dry Gas Dry Gas			
Recompletion Change in Ownership	Casinghead Gas Condens	ate 🗍	
If change of ownership give name	·		
and address of previous owner	A (
. DESCRIPTION OF WELL AND I	EASE (-5417 Well No. Pool Name, Including For	rmation Kind of Lea	se Lease No.
Bell Lake Unit 1	18 BellLake Mo	<u> </u>	ral or Foo State E-5076
Location	۲۸ ۲ عا	610	The Fast
Unit Letter I: 1980 Feet From The South Line and 660 Feet From The EasT			
Line of Section 36 Tow	mship 235 Range 3	33 E, NMPM, Le	2 a County
I. DESIGNATION OF TRANSPORT	TED OF OU AND NATURAL GAS	i.	
Name of Authorized Transporter of Oil	or Condensate	Andress (Give address to which appr	roved copy of this form is to be sent)
Permia m (o) Name of Authorized Transporter of Cas	nporation	Address (Give address to which appr	a S roved copy of this form is to be sent)
Transwestern	0, 1,	Odessa, Texa	
If well produces oil or liquids,	Unit Sec. Twp. P.ge.		/hen
give location of tanks.	th that from any other lease or pool, g	vive commingling order number:	
If this production is commingled with COMPLETION DATA		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completion		X Box Bo	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
9-18-7 6 Elevations (DF, RKB, RT, CR, etc.)	2-10-77 Name of Producing Formation	13 9 6 0 Top 01/Gas Pay	13912 Tubing Depth
3 637 GR	Morrow, South	13360	11571
Perforations	2.7/		Depth Casing Shoo
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	730	SACKS CEMENT
74 3/4"	10 3/4"	5170	2350
91/2"	7 5/8"	12 464	300
6 5"	5-7/8	13 960	
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow OIL WELL			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	tiji, etc.j
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Leu Du	Water-Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbls.		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
5300	4 hour	0	O
Testing Method (pitot, back pr.) Ovifice meter	Tubing Pressure (Shut-in) 5020	Casing Pressure (Shut-in)	Choke Size 12/64
CERTIFICATE OF COMPLIAN	······································	OIL CONSER	VATION COMMISSION
		APPROVED WALL	. 19
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Levis lester	
above is true and complete to the best of my knowledge and belief.		By Control of the Con	
		在 并配置	
(2.01) Y/o_	Mrs)	If this is a secure for all	in compliance with RULE 1104. Illowable for a newly drilled or deepene
11	nature)	well, this form must be according tests taken on the well in according to	when the solution of the deviation
£	ive Supervisor	All sections of this form able on new and recompleted	must be filled out completely for allow
February 1	5, 1977	Eill out only Sections 1	I II III, and VI for changes of owner
well name or number, or transporter, or other such change of condition of the such change of conditions of the such change			
MYNORG BJ, WS6	03(2), Partners(3,	completed wells.	

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