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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AUG 30 7 47 AM '65

OFFICE

REPORTER

OIL

GAS

REPORTER

REPORTING OFFICE

for

Continental Oil Company

Address

Box 460, Hobbs, New Mexico

Reason(s) for filing (Check proper box)

New Well

☐

Change in Transporter of:

Recompletion

☒☐

Dry Gas

☐

Change in Ownership

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

Deepen and Recomplete

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Lease No.	Well No.	Pool Name, Including Formation	Kind of Lease
Vaughan B-1		2	Langlie Mattix	State, Federal or Fee Federal
Location				
Unit Letter	F	1650	Feet From The North	Line and 1650
		Feet From The West		
Line of Section	1	Township	24-S	Range
		36-E		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"/>	Address (Give address to which approved copy of this form is to be sent)
Shell Pipe Line Co.		Box 1910, Midland, Texas
Name of Authorized Transporter of Casinghead Gas	<input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company		Jal, New Mexico
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	A	1
		24
		36
		Is gas actually connected?
		Yes
		When
		-

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
	X				X			
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.S.T.D.			
7-13-65	7-21-65		3574		3625 DOD			
Elevations (DF, RMB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Queen 3353	Yates - Seven Rivers				3096			
Perforations					Depth Casing Shoe			
3506, 3524, 3527, 3550, 3555, 3562, 3573, 3592, 3596, 3602					2891			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
11	7 5/8"		2810		250			
6 3/4	4 1/2" Liner		3625		180			

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
8-25-65	8-26-65	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	33	33	Open
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF
40	40	1	16

GAS WELL

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

VI. CERTIFICATION 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.

APPROVED

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.

Staff Supervisor

(Title)

August 27, 1965

(Date)

NMCCC-5, LPT File