

NO. OF COPIES RECEIVED		
DISTR.BUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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

JUL 23 1 21 PM '66

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

If change of ownership give name and address of previous owner

ILLEGIBLE

II. DESCRIPTION OF WELL AND LEASE

Lease Name Stevens B	Well No. 12	Pool Name, including Formation Langlie Matrix	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter J, 1650 Feet From The South Line and 1650 Feet From The East Line of Section 7 Township 23S Range 37E, 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"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Box 2105, Hobbs, New Mexico			
If well produces oil or liquids, give location of tanks.	Unit 3	Sec. 12	Twp. 23	Rge. 36
	Is gas actually connected? yes		When 7-14-66	

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"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date work began 7-11-66	Date Compl. Ready to Prod. 7-20-66	Total Depth 3725	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3362 DF	Name of Producing Formation Penrose Sand @ 3605	Top Oil/Gas Pay 3626'	Tubing Depth 3647					
Perforations 3627, 3633, 3637, 3646, 3655, 3660, 3677, 3692, 3696 w/2 JSPF	Depth Casing Shoe 3725							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
No	change in casing							
7 7/8	4" 9.11# liner		3725		60 sk class C			

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 7-24-66	Date of Test 7-28-66	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hours	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 327	Oil-Bbls. 128	Water-Bbls. 199	Gas-MCF 570

GAS WELL

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

Staff Supervisor
July 29, 1966
NMCC-3, Std-2, Atl-Res-2,
Pan Am-Hobbs-3, File

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.