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TRANSPORTER	OIL GAS
PRODUCTION OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

(Form C-104)
Revised 7/1/57

REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

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.

San Jose, New Mexico

August 7, 1963

(Place)

(Date)

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

Continental Oil Company Lynn 3-1

Well No. _____, in _____ 1/4 _____ 1/4,

(Company or Operator)

(Lease)

Sec. 7

T. 13-S

R. 36-S

NMPM,

San Jose, New Mexico

Pool

Part Letter
102

County Date Spudded 7-1-63

Date Drilling Completed 7-16-63

Elevation 3378

Total Depth 3730

PBTD

Please indicate location:

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

Top Oil/Gas Pay 3578

Name of Prod. Form. Seven Drivers

PRODUCING INTERVAL - 3578-81, 3581-81, 3603-04, 3604-05, 3641-42, 3644-46, 3656-58, 3664-66, 3676-79, 3686-88, 3690-92 &

Perforations

Open Hole

Depth

Casing Shoe 3730

Depth

Tubing 3707

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): 60 bbls. oil, 7 bbls. water in 4 hrs, _____ min. Size 16/64"

GAS WELL TEST -

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

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: _____ MCF/Day; Hours flowed _____

Choke Size _____ Method of Testing: _____

Acid Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand) 1500 gal. 15% HCl, 40 gal. Unifrac, 60,000 lb. Sand

2000 lbs. 15% HCl, 40 gal. Unifrac, 60,000 lb. Sand

Casing 610

Tubing 300

Date first new

8-5-63

Press.

Press.

oil run to tanks

Oil Transporter

Texas-New Mexico Line Line Co.

Gas Transporter

Remarks: on 7-16-63, 7:00 AM at rate of 179 MCF in 1 Hrs. 15% HCl.

GAR - 9887, 1st. daily allow 4000

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: _____

Title: _____

By: _____ (Signature)

Title: District Superintendent

Send Communications regarding well to:

Name: Continental Oil Co.

San Jose, New Mexico