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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 9 2 20 PM '69

I. Operator
Continental Oil Company
Address
Box 460, Hobbs, New Mexico 88240
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

II. DESCRIPTION OF WELL AND LEASE **UNDESIGNATED**
Lease Name McCallister A Well No. 5 Pool Name, including Formation Scarbrough Yates Seven Rivers Kind of Lease Federal Lease No. LC030167-A
Location
Unit Letter R : 660 Feet From The North Line and 330 Feet From The East
Line of Section 25 Township 26S Range 36E N.M.P.M. Lea County New Mexico County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Shell Pipeline Company Address (Give address to which approved copy of this form is to be sent)
Box 1910, Midland, Texas
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit 24 Sec. 26 Twp. 36 Rge. No Is gas actually connected? No 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.
Date Spudded 6-18-69 Date Compl. Ready to Prod. 7-2-69 Total Depth 3268' P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.) 2946' DF Name of Producing Formation Yates Top Oil/Gas Pay 3243' Tubing Depth
Perforations 3243'-3240 1/2'-3229 1/2' w/1-3/8" J.S.P.F. Depth Casing Shoe 3268
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE 12 1/4" CASING & TUBING SIZE 8 5/8" DEPTH SET 514' SACKS CEMENT 175
7 7/8" 5 1/2" 3268' 166
2 3/8" 3215'

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 7-1-69 Date of Test 7-2-69 Producing Method (Flow, pump, gas lift, etc.) Swabbed & flowed
Length of Test 21 Tubing Pressure 60 psi Casing Pressure 32 1/4 Choke Size 32/64
Actual Prod. During Test 292 Oil-Bbls. 47 (10 bbl load w/2) Water-Bbls. Gas-MCF

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.
Robert Powell III (Signature)
Adm. Section Chief (Title)
7-3-69 (Date)
OIL CONSERVATION COMMISSION
APPROVED 1969, 19
BY [Signature]
TITLE Commissioner
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.