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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-11
Effective 1-1-65

I.

Operator <i>Continental Oil Company</i>	
Address <i>Box 460 Hobbs, New Mexico</i>	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	

If change of ownership give name and address of previous owner

THIS WELL WAS PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

UNLESS AN EXCEPTION TO R-4070 IS OBTAINED
10/1/73

II. DESCRIPTION OF WELL AND LEASE

Lease Name <i>Wimbush 12</i>	Well No. <i>2</i>	Pool Name, including Formation <i>Triple X, Delaware</i>	Kind of Lease State, <input checked="" type="checkbox"/> Federal or Fee	Lease No. <i>NM.02889</i>
Location Unit Letter <i>H</i> : <i>4980</i> Feet From The <i>North</i> Line and <i>660</i> Feet From The <i>East</i> Line of Section <i>12</i> Township <i>24-S</i> Range <i>32-E</i> , NMPM, <i>Dea</i> 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"/> <i>Perman Corp.</i>	Address (Give address to which approved copy of this form is to be sent) <i>Box 3119 Midland Texas 79701</i>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <i>None</i>	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 <i>H</i>	Sec. <i>12</i>	Twp. <i>24-S</i>	Rge. <i>32-E</i>	Is gas actually connected? <i>NO</i>	When <i>NA</i>

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 <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded <i>6-28-73</i>	Date Compl. Ready to Prod. <i>7-18-73</i>	Total Depth <i>5070'</i>	P.B.T.D. <i>5054'</i>					
Elevations (DF, RKB, RT, GR, etc.) <i>3570 GR</i>	Name of Producing Formation <i>Delaware</i>	Top Oil/Gas Pay <i>4979'</i>	Tubing Depth <i>4915'</i>					
Perforations <i>4983', 4987', 4991', 4995', 4999' & 5001'</i>	Depth Casing Shoe <i>5070'</i>							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<i>12 1/4"</i>	<i>8 3/8"</i>	<i>422'</i>	<i>Circ. - 225 Sks.</i>
<i>7 7/8"</i>	<i>5 1/2"</i>	<i>5070'</i>	<i>430 Sks.</i>
	<i>2 3/8"</i>	<i>4915'</i>	

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 <i>7-18-73</i>	Date of Test <i>8-14-73</i>	Producing Method (Flow, pump, gas lift, etc.) <i>Pump</i>	
Length of Test <i>24 hrs.</i>	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls. <i>77</i>	Water-Bbls. <i>70</i>	Gas-MCF <i>175</i>

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.

[Signature]
(Signature)
Administrative Supervisor
(Title)
August 27, 1973
(Date)

USGS-2
NMOCC-5
File

OIL CONSERVATION COMMISSION

APPROVED *[Signature]*, 19 *1973*
BY *[Signature]*
TITLE *SUPERVISOR DISTRICT I*

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.

August 27, 1973


New Mexico Oil Conservation Commission
P. O. Box 1980
Hobbs, New Mexico 88240

Gentlemen:

In compliance with New Mexico Oil Conservation Commission Rule III, we are submitting below a list of deviation surveys taken on Continental Oil Company's Windsor 12 No. 2, located in Unit 14 Section 12, Lea County, New Mexico.

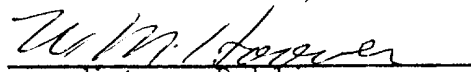
<u>DEPTH</u>	<u>DEGREE</u>	<u>DEPTH</u>	<u>DEGREE</u>	<u>DEPTH</u>	<u>DEGREE</u>
<u>250'</u>	<u>$\frac{1}{2}^{\circ}$</u>	<u>3880'</u>	<u>$1\frac{1}{4}^{\circ}$</u>	_____	_____
<u>422'</u>	<u>$\frac{3}{4}^{\circ}$</u>	<u>3926'</u>	<u>$1\frac{1}{2}^{\circ}$</u>	_____	_____
<u>850'</u>	<u>$\frac{3}{4}^{\circ}$</u>	<u>4182'</u>	<u>$1\frac{1}{2}^{\circ}$</u>	_____	_____
<u>1200'</u>	<u>$\frac{3}{4}^{\circ}$</u>	<u>4430'</u>	<u>2°</u>	_____	_____
<u>1460'</u>	<u>1°</u>	<u>4630'</u>	<u>$2\frac{1}{4}^{\circ}$</u>	_____	_____
<u>1771'</u>	<u>$\frac{3}{4}^{\circ}$</u>	<u>4818'</u>	<u>3°</u>	_____	_____
<u>2044'</u>	<u>1°</u>	<u>4934'</u>	<u>$2\frac{3}{4}^{\circ}$</u>	_____	_____
<u>2322'</u>	<u>$1\frac{1}{4}^{\circ}$</u>	_____	_____	_____	_____
<u>2572'</u>	<u>$1\frac{3}{4}^{\circ}$</u>	_____	_____	_____	_____
<u>3630'</u>	<u>1°</u>	_____	_____	_____	_____
<u>3780'</u>	<u>$1\frac{1}{4}^{\circ}$</u>	_____	_____	_____	_____

Yours very truly,



Subscribe and sworn to before me, a Notary Public, in and for Lea County, New Mexico, this 27th day of August, 1973.

2-20-77
My Commission Expires


Notary Public