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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

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

If change of ownership give name and address of previous owner

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

R-5124

II. DESCRIPTION OF WELL AND LEASE  
Lease Name Bell Lake Unit 5 Well No. 16 Pool Name, including Formation So. Bell Lake Morrow Kind of Lease Federal or Fee LC 061374  
Location  
Unit Letter A ; 660 Feet From The NORTH Line and 660 Feet From The EAST  
Line of Section 7 Township 24S Range 34E , NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Permian Trucking</u>	<u>Midland Texas</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Transwestern Pipeline Company</u>	<u>Suite 614, 1<sup>st</sup> National Bank, Odessa TX.</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>A 7 24S 34E YES 9-7-1975</u>

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'tv.	Diff. Res'tv.
		<input checked="" type="checkbox"/>						
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
<u>1-31-1975</u>	<u>8-28-1975</u>	<u>14140</u>	<u>13954</u>					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
<u>3599 GR</u>	<u>Morrow</u>	<u>13802'</u>	<u>12300</u>					
Perforations			Depth Casing Shoe					
<u>13802'-13830'</u>								

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>20"</u>	<u>16" CSG</u>	<u>599'</u>	<u>500sks CLASS "C"</u>
<u>14 3/4"</u>	<u>10 3/4" CSG</u>	<u>5168</u>	<u>2600sks CLASS "C"</u>
<u>9 1/2"</u>	<u>7 7/8" CSG</u>	<u>12331</u>	<u>1725 SKS</u>
	<u>5" CSG Liner</u>	<u>14140</u>	<u>400 SKS CLASS "H"</u>

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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
<u>6800 MCF</u>	<u>4 HRS</u>	<u>41 MMCF</u>	<u>43.8</u>
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
<u>back pressure</u>	<u>7155</u>		<u>12/64"</u>

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.

Ralph J. Bradley  
(Signature)

Administrative Supervisor  
(Title)

October 11, 1975  
(Date)

5 NMOC 2USGS 3 PARTNERS

OIL CONSERVATION COMMISSION

APPROVED 10/11/75, 19

BY John W. Remyan

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 multiple completed wells.