

NEW MEXICO OIL CONSERVATION COMMISSION  
Santa Fe, New Mexico

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

REQUEST FOR (OIL) - (~~GAS~~) ALLOWABLE

New Well  
~~EXISTING WELL~~

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 QUADRUPLICATE 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.

Eunice, New Mexico

3-18-63

(Place)

(Date)

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

Continental Oil Company State A-2, Well No. 3, in SW  $\frac{1}{4}$  SE  $\frac{1}{4}$ .  
(Company or Operator) (Lease)

0 Unit Letter, Sec. 2, T. 25-S, R. 37-E, NMPM, North Justis Blinberry Pool

Lea

County. Date Spudded. 2-6-63

Date Drilling Completed 3-2-63

Please indicate location:

Elevation Est. 3138 Total Depth 6650 FRTD -

Top Oil/Gas Pay 5036 Name of Prod. Form. Blinberry

PRODUCING INTERVAL - 5362-65, 5413-15, 5454-56, 5504-08, 5558-63,

Perforations 5568-70, 5599-5601, & 5614-17

Open Hole \_\_\_\_\_ Depth \_\_\_\_\_  
Casing Shoe 6645 Depth \_\_\_\_\_  
Tubing \_\_\_\_\_

OIL WELL TEST -

Natural Prod. Test: \_\_\_\_\_ bbls. oil, \_\_\_\_\_ bbls. water in \_\_\_\_\_ hrs, \_\_\_\_\_ min. Choke Size \_\_\_\_\_

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): 231 bbls. oil, 18 bbls. water in 24 hrs, \_\_\_\_\_ min. Choke Size 18/64

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 or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and

sand): 1000 gals 15% ISTNE acid, 15,000 gals crude, 15,000# sand,  
Casing \_\_\_\_\_ Tubing \_\_\_\_\_ Date first new \_\_\_\_\_  
Press. - Press. 875 oil run to tanks 3-14-63 75# "ADOMITE"

Oil Transporter Texas-New Mexico Pipe Line Company

Gas Transporter El Paso Natural Gas Company

Remarks: IP flowed 231 BO, 18 BW, with 202 MCFG, in 24 hours, GOR 874, Choke 18/64, TP 875#,  
Estimated daily allowable 48 BO.

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: \_\_\_\_\_  
(Signature)

By: \_\_\_\_\_

Title: District Superintendent  
Send Communications regarding well to:

Title: \_\_\_\_\_

Name: Continental Oil Company

NMOCC-4 SID WAM File

Address: P.O. Box 68 Eunice, New Mexico