

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

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I.

Operator Continental Oil Company	
Address Box 460, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Jack A-29	Well No. 7	Pool Name, Including Formation Langlie Martin 7 Rivers Queen	Kind of Lease State, Federal or Fee	Lease No. NM7486
Location Unit Letter J ; 2250' Feet From The South Line and 1750' Feet From The East				
Line of Section 29 Township 24S Range 37E, NMPM, Lea 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"/> Texas-New Mexico Pipeline Co	Address (Give address to which approved copy of this form is to be sent) Box 1510 Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> EL Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) EL Paso Texas					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 29	Twp. 24	Rge. 37	Is gas actually connected? yes	When 6-8-71

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 5-19-71	Date Compl. Ready to Prod. 6-8-71	Total Depth 3660'	P.B.T.D. 3609'					
Elevations (DF, RKB, RT, GR, etc.) 3271' DF	Name of Producing Formation Langlie Martin 7 Rivers	Top Oil/Gas Pay 3392'	Tubing Depth 3582'					
Perforations 3395', 3397', 3475', 3477', 3510', Queen 3514', 3530', 3535', 3579' w/150' x			Depth Casing Shoe 3660'					
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4" 7 1/2"	CASING & TUBING SIZE 8 1/2" 5 1/2" 2 3/8"		DEPTH SET 770' 3660' 3582'		SACKS CEMENT 350 sacks - class "C" 150 sacks - class "C"			

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 6-8-71	Date of Test 6-24-71	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 52	Water - Bbls. 36	Gas - MCF 32

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

John A. Smith
(Signature)
Admin Supervisor
(Title)
June 28, 1971
(Date)
NHCCC-5 USGS(2)
NMFU (4) File

OIL CONSERVATION COMMISSION

APPROVED JUL 7 1971, 19
BY John A. Smith
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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

RECEIVED

JUL - 7 1971

OIL CONSERVATION COMM.
HOBBS, N. M.