| | | | 1 | |
|--|---|--|--|--|
| NO. OF COPIES RECEIVED | 1 | | | |
| DISTRIBUTION | NEW MEXICO C | NEW MEXICO OIL CONSERVATION COMMISSION Form C-124 | | |
| SANTA FE | | REQUEST FOR ALLOWABLE Form C-104 Supersedes Old C-104 and C-11 | | |
| FILE U.S.G.S. | | AND | Effective 1-1-55 | |
| LAND OFFICE | AUTHORIZATION TO | TRANSPORT OIL AND NATURAL GA | ss — | |
| IRANSPORTER OIL | | | | |
| GAS / | | | | |
| OPERATOR Z | | | | |
| PROPATION OFFICE | <u> </u> | | | |
| Conoco Inc | | | | |
| Address | | | | |
| P.O. Box 4 | | 33240 | ; | |
| Reasons) for tiling (Check proper | | Other (Please explain) | | |
| Recompletion | Change in Transporter of: | Change of corporat | re name from | |
| Change in Ownership | | y Gas Continental Oil Co | ompany effective | |
| | | July 1, 1979. | | |
| If change of ownership give named and address of previous owner _ | ne | | | |
| . DESCRIPTION OF WELL AS | ND LEASE | | | |
| Lease Name | Weil No. Fool Name, Includi | | Lease No. | |
| AXI Apache A | 9 Ballard Pi | dured Cliffs State, Federal or | Fee INDIAN C-77 | |
| Λ | 990 Feet From The N | Line and990 Feet From The | 6 | |
| Cint Letter; | Feet From The | Line and 990 Feet From The | - <u>E</u> | |
| Line of Section D | Township $23-N$ Range | 5-W , NMPM, Rio Ar | riba County | |
| PROJECT ATTENDED | | | | |
| Name of Authorized Transporter of | ORTER OF OIL AND NATURAL | GAS Address (Give address to which approved | | |
| | | Addiess force address to which approved | copy of this form is to be sent; | |
| Name or Authorized Transporter of | Casingheda Gas or Dry Gas A | Address (Give address to which approved | copy of this form is to be sent) | |
| bas Company | of New Mexico | FIRST INTERNATIONAL BO | Pb. 12.70 75270 | |
| If well produces oil or liquids, | Unit Sec. Twp. Age. | Is gas actually connected? When | 3, 74,93 / 3= 70 | |
| give location of tanks. | | | | |
| If this production is commingled COMPLETION DATA | with that from any other lease or po | ol, give commingling order number: | | |
| | Oil Well Gas We | I New Weil Workover Deepen P | lug Back - Same Rest. Diff. Resty. | |
| Designate Type of Comple | | | | |
| Date Spugged | Sate Sompi, Reday to Prod. | Total Depth P | .a.T.D. | |
| Elevations (DF, RKB, RT, GR, etc. | ., Name of Producing Formation | T 01/ (C 8 | ! | |
| State of the state | ., itame of Producing Formation | Top Oil/Gas Pay | Tubing Depth | |
| Personations | | D | epth Casing Shoe | |
| | | | | |
| | TUBING, CASING, | AND CEMENTING RECORD | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | |
| | | | | |
| | | | | |
| | | | | |
| TEST DATA AND REQUEST | FOR ALLOWABLE (Test must b | e after recovery of total volume of load oil and | must be equal to or exceed too allow | |
| OIL WELL | able for thi | depth or be for full 24 hours) | | |
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, e | (c.) | |
| Length of Test | Tubing Pressure | Casing Pressure IC | hoxe Size | |
| 25.10 | 142 | Cusing Pleasure | | |
| Actua, Proa. During Test | 011 - 3016. | Water-Bbls. G | an-MCF (S) | |
| | | | 0191 M. | |
| | | | Travity of Candenage Ole | |
| GAS WELL Actual Prod. Test-MCF/D | | | 10,04.3 | |
| Actual Piod. 1881-MCF/D | Length of Test | Bbls. Condensate/MMCF Gi | ravity of Cindensorie | |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Cosing Pressure (Shut-in) C | hoxe Size | |
| | | | 3110 | |
| CERTIFICATE OF COMPLIA | ANCE | 011 0011055311171 | ON COMMISSION | |
| OLDINIONIE OF COMPLIA | 1.TOE | OIL CONSERVATI | | |
| I hereby certify that the rules ar | nd regulations of the Oil Conservati | on APPROVED JUN 1 | 9 19/919 | |
| Commission have been complied | d with and that the information give the best of my knowledge and beli | en Original Signed by | FRANK T. CHAVEZ | |
| above is time and complete to | the dest of my knowledge and belt | EL. BY | 1917 2714, 9151. #3 | |
| <u>ش</u> ء | | TITLE TOTAL CONTRACTOR | The state of the s | |
| $\sim \nu / 1/2$ | / | 11 | | |

Division Manager

FILE

NMOCD (5) Aztec

(Title)

(Date)

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 pleted wells.