Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, New Mexico 87504-2088

1000 Rio Brszos Rd., Aztec, NM - 8/41 I.	REQUEST F	OR ALLOWAE							
Operator Conoco Inc.	10 111	ANOI OITI OIL	.7(10) (17)	1011112 01	Well A	fino. 03903	40200		
Address	01.7-1		v 70110	· · · · · · · · · · · · · · · · · · ·					
3817 N.W. EXP	oressway, Oklah D	ioma City, U		er (Please explo	iúi)				
New Well		Transporter of:							
Recompletion U	Oil	Dry Gas U							
Change in Operator	Casinghead Gas	Condensate							
and address of previous operator									
II. DESCRIPTION OF WELL Lease Name	L AND LEASE Well No.	Pool Name, Includi	ne Formation		Kind o	f Lease	Lean	No.	
N.E. HAGNES	1 ./	BASIN		4 (GAS)		Federal or/Fee	C-3		
Location	3		}		^ ^		\		
Unit LetterE	: 1650	Feet From The	Lin	e and	20 Fe	et From The	ω	Line	
Section 3 Town	uhip 24N	Range 54	Ν, د	мрм,	io An	-REIJA		County	
	ANGRARIER OF C		D.1. (110						
III. DESIGNATION OF TRA Name of Authorized Transporter of Oi			Address (Giv	e address to w	hick approved	copy of this for	rm is to be sent)	-	
GIANT REFINING C	, L.J 3.	ansare (C)	23733 11.	Sports	AFR.	SCOTTSDA	le, AZ 8	525	
Name of Authorized Transporter of Ca	singlead Gas	or Dry Gas	Address on	ditress to w	hich approved	copy of this for	im is to be east)		
(SONOCO /NC Il well producés oil or liquids,	Unit Sec.	Twp., Rge.	is gas actuall). Exp/CESS v connected?	When	AHOMACC	Brok 1	// <i>J</i>	
give location of tanks.	P1/6	JUNI SW	ye	53	Y				
If this production is commingled with t	hat from any other lease of	r pool, give comming	ling order p um	ber:	R-220	<u> </u>		·	
IV. COMPLETION DATA	Oil We	II Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	HT Res'v	
Designate Type of Completi			i						
Date Spudded	Date Compl. Ready	lo Prod.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			
		, CASING AND	CEMENTI			·	ACVD OFHE	• • • • • • • • • • • • • • • • • • • •	
HOLE SIZE CASING & TUBII		IUBING SIZE		DEPTH SET			ACKS CEME		
			<u> </u>					····	
V. TEST DATA AND REQU	JEST FOR ALLOY	ABLE	ــــــــــــــــــــــــــــــــــــــ			J			
OIL WELL (Test must be af	ter recovery of total volum						or full 24 hours)	
Date First New Oil Run To Tank	Date of Test		Producing M	lethod (Flow, p	ump, gas lýt,	elc.)			
Length of Test	Tubing Pressure		Casing Fresh	nut to the		Choke	5 M P	00 80 0	
			Water - Bb	L W E	. U U U	K	EGE	IVE	
Actual Prod. During Test	Oil - Bbis.	Oil - Bbis.		AUG2	a 1990	500 P.O	CEDO 4	1000	
CARTURIT			.1			. I	SEP24	19 90	
GAS WELL [Actual Prod. Test - MCF/D]	Length of Test		Bbls. Conde		N. DI \	Cravity (D)	H-GON	. DIV	
			DIST. 3			DIST 3			
Testing Method (pitot, back pr.)	Tubing Pressure (Sh	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIF				OIL COI	NSERV	ATION I	DIVISIO	N .	
I hereby certify that the rules and r Division have been complied with	egulations of the Oil Cons and that the information a	ervation iven above			10L114	SEP 2		, •	
is true and complete to the best of	my knowledge and belief.		Date	e Approve	ed	DET &	J. 1000		
15 Baton			1	r p	3	1) E	2/		
Signature	Adminiator	tivo Cura	By_	 					
J. E. Barton Printed Name	Administrat	Title	Title	.	SUPE	HVISOR	DISTRICT	f J	
Deta	(405) 94	48-3120	11110	· · · · · · · · · · · · · · · · · · ·					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.