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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		3
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  
Conoco Inc.  
Address  
P.O. Box 460, Hobbs, New Mexico 88240  
Reason(s) for listing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
Change of corporate name from Continental Oil Company effective July 1, 1979.  
*Name change only*  
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE  
Lease Name  
Jicarilla 30  
Well No.  
12  
Pool Name, including Formation  
Lindreth Gallup-Dakota, West  
Kind of Lease  
State, Federal or Fee Indian  
C-41  
Location  
Unit Letter  
H  
Feet From The  
2,210  
Line and  
N  
Feet From The  
990  
E  
Line of Section  
30  
Township  
25N  
Range  
4W  
NMPM,  
Rio Arriba  
County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Shurtliff Oil Co.  
Address (Give address to which approved copy of this form is to be sent)  
Farmington, NM  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
EL Paso Natural Gas  
Address (Give address to which approved copy of this form is to be sent)  
EL Paso, TX  
If well produces oil or liquids, give location of tanks.  
Unit  
O  
Sec.  
29  
Twp.  
25  
Rge.  
4  
Is gas actually connected?  
NO.  
When

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 Resh.	Diff. Resh.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	F.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

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-Bbls.  
GRAVITY OF CONDENSATE  
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.  
*[Signature]*  
Division Manager  
6-11-79  
NMOCD (5) Aztec  
FILE  
OIL CONSERVATION COMMISSION  
JUN 19 1979  
APPROVED Original Signed By FRANK T. HAYLZ  
BY  
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 multiply completed wells.