Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

I.		OR ALLOWAE			ION			
Operator Conoco Inc.					300392198300			
Address	01.1	hama City O	V 70110	·········			7000	
3817 N.W. Expr	essway, Ukla	noma City, U		ease explain)	 			
New Well	Change j	n Transporter of:		tage explaining				
Recompletion	-4	Diy Gas						
Change in Operator	Casinghead Gas	Condensate 2						
and address of previous operator				 				
II. DESCRIPTION OF WELL		72						· · · · · · · · · · · · · · · · · · ·
Location Name AN AZACHE N Location	Well No		ng Pormation ESAVECDE	Leane lederal or Fee D/H N	C-1	ze No.		
Unit Letter	. 1500	_ Feet From The	5	X20		. m . m	w	• • •
Um Dater		rea from the	Line and	<u> </u>	<u> </u>	t From The		Line
Section / C Townshi	· 25~	Range Gu	, NMPM,	KIOF	+KK	(B4		County
III. DESIGNATION OF TRAN	SPORTER OF (OIL AND NATU	RAL GAS					
Name of Authorized Transporter of Oil	or Conde		Address (Give add	ress to which a	pproved	copy of this for	? <i>1</i>	
	ANTICEFINING CO. USAS				Pd, 50	POTTSDAK	AZ 8	
BAS COMBANE OF	·	or Dry Gas	Address (Give add P.O. BOK)	1899 B	<i>"</i>	copy of this for		417
If well produces oil of liquids	Unit Sec.	Twp. Rge.	Is gas actually com	nected?	When		77	,,
give location of tanks.	1		45	• 	<u> </u>	-		
If this production is commingled with that IV. COMPLETION DATA	from any other lease o	r pool, give commingi	ing order dumber:					
Designate Type of Completion		i	New Well Wo	rkover D	oepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready	to Prod.	Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay Tubing Depth					
Perforations			<u> </u>	Depth Casing Shoe				
	TUBINO	, CASING AND	CEMENTING I	RECORD		<u> </u>		
HOLE SIZE	E SIZE CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT .		
				· · · · · · · · · · · · · · · · · · ·				
i menom bida ilib bround								
V. TEST DATA AND REQUES OIL WELL (Test must be after t	SI FUR ALLUM recovery of total volum		he sound to an execu-	ed ton allowah	la far thia	dawk ar ba fa	- 6dl 24 bas	1
Date First New Oil Run To Tank	Date of Test	e of load on and musi	Producing Method				7 Jul. 24 Note	73.)
						r==		
Length of Test	Tubing Pressure		Casing Prompte			Choke Size		
Actual Prod. During Test	Oil - Bbls.	·	Water - Bilg			Q-MCF		
			21.49	ICT 2.1	200.			
GAS WELL				- 13 				
Actual Prod. Test - MCF/D	Length of Test		Bus. Condition MICON. DIV			Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (S	HICTORY S]	Choke Size	•	
VI. OPERATOR CERTIFIC	ATE OF COM	PLIANCE						
I hereby certify that the rules and regul	lations of the Oil Cons	ervation	OIL	CONS	ERV	ATION [DIVISIO	N
Division have been complied with and is true and complete to the best of my	OCT 0 3 1990							
			Date Ap	proved.				
WW Baker	Di	By Bull Chang						
Signature Lab J. E. Barton	SUPERVISOR DISTRICT #3							
Printed Name -90	Administrat (405) 94	Title	Title		JUFE	I VISUR L	//3 MIC	73
Dute		18-312U Sephone No.						

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.