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State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III 1000 Rio Brizzos Rd., Aziec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

| I. | REQUEST FOR | R ALLOWABI ISPORT OIL | | | | | | |
|--|-----------------------------|---------------------------------|------------------------------------|-----------------|---------------------------------------|--------------------|-----------------|---|
| Operator | TOTHAN | ISPONT OIL | AND NATOR | IAL GA | <u> </u> | l No. | | |
| Conoco Inc. | | | | | 30 | 03922 | 66400 |) |
| Address 3817 N.W. Expre | osswav. Oklahoi | ma Citv. Ol | < 73112 | • | | | | |
| Reason(s) for Filing (Check proper box) | sanay, Oktailoi | ina crey, or | | ease explai | n) | | | |
| New Well | Change in T | ransporter of: | | · | | | | |
| Recompletion | | Ory Clas | | | | | | |
| Change in Operator | Casinghead Gas C | Condensate \(\(\frac{1}{2} \) | | | | | | |
| and address of previous operator | | | | | | | | · |
| u. DESCRIPTION OF WELL | | | | | | | -1 | ·· :: · · · · · |
| N.T. HAGNES | Well No. P | ool Name, Including | R Formation AKOTA | CAS | Kind of State, F | ederal pr Fae | | e Na 36 |
| Location / | (0 m n) | | . 1 | // 5 | \sim | | _ | |
| Unit Letter | : 1000 F | eet From The | Line and | 165 | Fee | t From The | | Line |
| Section 2 Township | , 24N F | Range Sw | , NMPM, | K | o Aic | COA | | County |
| Ш. DESIGNATION OF TRAN | SPORTER OF OIL | | | | | | | • |
| Name of Authorized Transporter of Oil | or Condensa | L.N.i | Address (Give add | ress to whi | ch approved o | copy of this form | n is to be sent | Down or |
| (6/ANT KETINING C | | | 75733 1) - Sa Address (Gjre add | 00/504 | | | HE HO | 82000 |
| CONVED INC | | الما المارك | 3/1/N.W. Ex | | | | | |
| If well produces oil or liquids, | Unit Sec. 1 | _ · / · · _ · · | Is gas actually con | | O When | | | |
| zive location of tanks. | 171/66 | 74NI 5W | 905 | | <u> </u> | | ·-· | |
| f this production is commingled with that in IV. COMPLETION DATA | from any other lease or po | ool, give commingli | ng order humber: | 1 | >LC - 5 | 08 | | · |
| | Oil Well | Gas Well | New Well Wo | rkover | Deepen | Plug Back S | ame Res'v | NIT Res'v |
| Designate Type of Completion | | | 1 | l | | L | | I |
| Date Spudded | Date Compl. Ready to F | 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 Stree | | |
| | | | | | | | | |
| | | CASING AND | | |) | | CVO OFME | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | | SACKS CEMENT . | | |
| | | | | | | | | |
| | | | | | | | | |
| V. TEST DATA AND REQUES | ST FOR ALLOWA | DI E | L | | | | | |
| | recovery of total volume of | | be equal to or exce | ed top allo | wable for this | depth or be fo | r fill 24 hours | r.) |
| Date First New Oil Run To Tank | Date of Test | | Producing Method | | | | | |
| <u> </u> | | | - 10 | 17 60 | F # 97 | | | W 18 12 |
| Length of Test | Tubing Pressure | | Casing Pressure | 30 W | s s u | | CUE | |
| Actual Prod. During Test | Oil - Bbls. | | Water - Bbls. | Alle 2 | 9 1990 | Can Ber | | |
| • | | | | AUGZ | 9 1990 | | SEP24 | 1990 |
| GAS WELL | | | /) | IL CC | N. DI | V. ^ | LCO | I DIE |
| Actual Prod. Test - MCF/D | Length of Test | | Bbls. Condensate/ | MMCPDIS | ST. 3 | Cravity of Co | DICT | 7. 218 |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-i | (a) | Casing Pressure (S | | · · · · · · · · · · · · · · · · · · · | Choke Size | DIST | . 3 |
| resung Metriod (prior, out x pr.) | Troing . Toodary (care. | , | | , | | | | · |
| VI. OPERATOR CERTIFIC | ATE OF COMPI | LIANCE | | | | | טייייי | A 0 |
| I hereby certify that the rules and regulations of the Oil Conservation | | | OIL CONSERVATION DIVISION | | | | | |
| Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | | Date Approved SEP 2 5 1990 | | | | | |
| | - | | Date A | phone | J | | A | |
| > Elsata | · | | Ву | | 3. | 1) E | Van/ | • |
| Signifure J. E. Barton | Administrati | ve Supr. | | · , · . · · · · | | | NETRICE | |
| Printed Name | | Title | Title | <u></u> | SUFE | RVISOR | וטואזפונ | 73 |
| | TAILE UAX | - 31/11 | | | | | | |

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

Date

- 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.

Telephone No.

- 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.