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

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

RICT III

Santa Fe, New Mexico 87504-2088

DISTRIC	ш				
1000 Rio	Restor	Rd.	Aziec	NM	87410
1000 100	D.12202				0, 120

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Ι.		TO TRAN	NSPORT O	L AND NA	ATURAL G					
Operator Conoco Inc.							API No. 20392	122300)	
Address		01.1-1		OV 7211						
3817 N.W. Expr	essway,	UKTANO	ma city,		LC ther (Please expl	ain)				
New Well		Change in I	ransporter of:		(* · · · · · · · · · · · · · · · · · ·					
Recompletion	Oil		Dry Gas 📙	•						
Change in Operator	Casinghead	I Gas 📋 C	Condensate				·			
and address of previous operator					 					
IL DESCRIPTION OF WELL	AND LEA								- 13	
Legal Name ACHE K Location		2A	Poor Name, Inclu	TUPED	VIFFS S		of Lease Federal or Fe		1347 157	
Unit Letter	_:// <u>^</u>	90	Feet From The _	<u>5</u> u	ne and	80 F	O pet From The .	E	Line	
Section 4 Townshi	· 26	<u>ر لہ</u>	Range &	<u>ر د</u>	MPM, K	Pio A	E1713	4	County	
III. DESIGNATION OF TRAN	SPORTE									
Name of Authorized Transporter of Oil	າ <mark>□</mark>	or Condens		Address (G.	ive address to w	1201 <	COTTSDILL	form is to be se LAZS	mi) 75355	
Name of Authorized Transporter of Chan	ghead Gas	,	or Dry Gas [[X	Address (G.	ive address to wi			orm is to be se	end)	
AS (OUL) AND A = / If well produces of or liquids, give location of tanks.	Unit	<u> </u>	Cwp. Rge	le gas actua	By connected?	When	rett, A	JM 87	413	
f this production is commingled with that	from any other	er lease or po	ool, give commin	eling order sur	E5	<u></u>				
V. COMPLETION DATA	<u> </u>	Oil Well	Gas Well	New Well		Deepen	Plue Back	Same Res'v	Diff Res'v	
Designate Type of Completion		<u>i</u> _		_i	i	j Dagas				
Date Spudded	Date Compl	Date Compl. Ready to Prod.		lotal Depth	Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth			
Perforations					<u> </u>			Depth Casing Shoe		
	T	UBING, C	ASING ANI	CEMENT	ING RECOR	D	<u> </u>			
HOLE SIZE		ING & TUE			DEPTH SET			SACKS CEMENT .		
	 									
V. TEST DATA AND REQUES	ET FOD A	LLOWA	DI E]			
OIL WELL (Test must be after r				si be equal to d	or exceed top allo	owable for thi	is depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Tes				Method (Flow, p			,,		
Length of Test	Tubing Pres	Tubing Pressure			Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbis.	Oil - Bbis.			Water - Dista			Gas- MCF		
ata weet	<u> </u>			<u> </u>	OCT 2	2 1990	J	 		
GAS WELL Actual Prod. Test - MCF/D	F/D Length of Test			Bble. Coqu	BHE COLUMN DIST 2			Cravity of Condensate		
Festing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pres	Casing Pressure (Shut-in)			Choice Size		
VI. OPERATOR CERTIFIC I hereby certify that the rules and regul Division have been compiled with and is true and complete to the best of my 1	ations of the (Oil Conserva mation given	tion	- 11	OIL CON	d		DIVISIO 1990	DN .	
Signature Signature				∥ By_		3.	•	Lean &		
Printed Name			re Supr.	Title]	SUPER	/ISOR DI:	STRICT	13	
5 10 10		~/ ~ ~	N-	11		•				

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.