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

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

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

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

I.			BLE AND AUTH					
Operator					Well API No. 30-045-11926			
Conoco Inc.					30-043	5-11-126		
3817 N.W. Expre	essway, Oklah	noma City, C		,				
Reason(s) for Filing (Check proper box) New Well	Chance is	Transporter of:	Other (Pleas	e explain)	•			
Recompletion	OII 🗀	Dry Gas	Effectiv	e date	: 7-1-	91		
Change in Operator	Caulnghead Gas	COROCERNIA []						
and address of previous operator MCSU	 	imited Part	nership, P.O.	BUX ZUU9	Amariiio,	1exas /9109		
LEASO Name	na Rossation	Kind	of Lease	Lease No.				
Babbitt	Well No. Pool Name, Including Dat SIN		Dakota State,		, Federal or Fee			
Location	. 1780		auth	1695		Fast In		
Unit Letter		_	cuth Line and _	-	eet From The	Ine Line		
Section I Township	, 26N	Range 91	.C NMPM.	San	Juan	County		
III. DESIGNATION OF TRAN	SPORTER OF O	IL AND NATU						
Name of Authorized Transporter of Oil or Condensate (XX) Giant Refining, Inc.			Address (Give address to which approved copy of this form is to be sent) Box 338, Bloomfield, New Mexico 87413					
Name of Authorized Transporter of Casinghead Gas or Dry Gas XX			Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas If well produces oil or liquids, Unit Sec. Twp. Rge.			P.O. Box 1492, El Paso, Texas 79999 Is gas actually connected? When ?					
give location of tanks.	J 24	16 9	Ve.S					
If this production is commingled with that f IV. COMPLETION DATA	from any other lease or	pool, give comming	ing order number:					
	Oil Wel	l Gas Well	New Well Works	over Deepen	Plug Back Sar	ne Res'v Diff Res'v		
Designate Type of Completion -	Date Compl. Ready to	o Prod	Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing P	Top Oil/Cas Pay		Tubing Depth				
Perforations			L		Depth Casing Si	Depth Casing Shoe		
	TIRING	CASING AND	CEMENTING RE	CORD	<u> </u>			
HOLE SIZE CASING & TUBING SIZE		DEPTH SET		IS IN ISA	SARKS PERENT			
			[]			B G E I V C.		
			i i i		MYAB	HAY 0 3 1991		
v. TEST DATA AND REQUES	 ET FOR ALLOW	ARLE	<u> </u>		MAIO	a Roje#		
			be equal to or exceed t	op allowable for i	Or cou	iii 24 hours.)		
Date First New Oil Run To Tank	Date of Test		Producing Method (Fi	low, pump, gas lift,	act Die	·.2		
Length of Test	Tubing Pressure		Casing Pressure		Choke Size	Choke Size		
uai Prod. During Test Oil - Bbis.		Water - Bbla		Gas- MCF	Gas- MCF			
Victoria 1100: Duning 1604	Oil - Boil.		- 201					
GAS WELL								
Actual Prod. Test - MCF/D	Length of Test		Bbla. Condensate/MMCP		Gravity-of-Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size			
VI OPER A TOR CERTIFIC	ATT OF COM	DI LANCE	<u> </u>					
VI. OPERATOR CERTIFICATE OF COMPLIANCE 1 hereby certify that the rules and regulations of the Oil Conservation			OIL CONSERVATION DIVISION					
Division have been complied with and it is true and complete to the best of my h	that the information giv				MAY 0 3 199	91		
	Date Approved							
WWENE.	By Buch). Chang							
N.W. Baker	SUPERVISOR DISTRICT #3							
Printed Name 91	(405) 94	Tide 8 31 <i>2</i> 0	Title					

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.