Submit 5 Copies
Appropriate District Office
DISTRICT I
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 Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator Conoco Inc. 20-E45-07336 Address 3817 N.W. Expressway, Oklahoma City, OK 73112 Other (Please explain) Reason(s) for Filing (Check proper box) New Well Change in Transporter of: Dry Gas Recompletion Casinghead Gas Condensate Change in Operator EFFECTIVE if change of operator give name and address of previous operator Texas 79189 Mesa Operating Limited Partnership, P.O. Box 2009, Amarillo, II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Pormation Kind of Lease Lease No. Lease Name State, Federal or Fee BLANCO MESALEXDE 5726 STATE Location Feet Prom The __ Line and __ Feet From The <u> 39 ~</u> 16 Township . NMPM. County Range III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) or Condensate XX Giant Refining, Inc. Box 338, Bloomfield, New Mexico 87413 or Dry Gas XX Name of Authorized Transporter of Casinghead Gas Address (Give address to which approved copy of this form is to be sent) El Paso Natural Gas P.O. Box 1492, El Paso, Texas 79999 If well produces oil or liquids, give location of tanks. Twp. Unit Sec is gas actually connected? When ? -6 16 129 1-9-53 If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA IV. COMPLETION DATA Deepen Oil Well Cas Well New Well | Workover Plug Back | Same Res'v Diff Reg'y Designate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth P.B.T.D. Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Tubing Depth Perforations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD SACKS CEMENT **HOLE SIZE CASING & TUBING SIZE** . TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth of full 24 h Date First New Oil Run To Tank Producing Method (Flow, pu Date of Test oke Size Casing Pressure Length of Test Tubing Pressure Water - Bbla. Actual Prod. During Test Oil - Bbls. **GAS WELL** Actual Prod. Test - MCF/D Bbls. Condensale/MMCP Length of Test Gravity of Condensate Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Testing Method (pitot, back pr.) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. MAY 0 3 1991 Date Approved . ょう By_ Signature W.W. Baker Administrative Supr. SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1164

Printed Nam

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title_

2) All sections of this form must be filled out for allowable on new and recompleted wells.

(405) 948-3120

Title

- 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.