

6
Submit 3 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-101
Revised 1-1-89
See Instructions
Bottom of Page
FEB 04 1991
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Conoco Inc.	Well API No. 30-045-27886
Address 3817 NW Expressway, Oklahoma City, Oklahoma 73112-1400	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of: NOTE: New connection for coalseam gas
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hughes "B"	Well No. 18	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078046
Location Unit Letter <u>B G</u> : <u>1370</u> Feet From The <u>North</u> Line and <u>1500</u> Feet From The <u>East</u> Line Section <u>21</u> Township <u>T29N</u> Range <u>R8W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> NA	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) 30th Street, Farmington, NM 87401	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
	Is gas actually connected? When?	
	No ASAP	

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 09/03/90	Date Compl. Ready to Prod. 09/21/90		Total Depth 3,186'		P.D.T.D. 3,150'			
Elevations (DF, RKB, RT, GR, etc.) 6,474' GR	Name of Producing Formation Fruitland		Top Oil/Gas Pay 2,914' 3006		Tubing Depth 3,005'			
Perforations 3006-3014', 3020-34, 3037-50, 3063-84					Depth Casing Shoe 3,156'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		260'		200 SXS			
7 7/8"	5 1/2"		3,156'		152 SXS G, 550 SXS G Lite			
	2 3/8" tubing		3,005'		POZ (65/35/6)			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test 10/01/90	Producing Method (Flow, pump, gas lift, etc.) Plunger lift (flowing)	RECEIVED OCT 12 1990 OIL CON. DIV. DIST. 3
Length of Test	Tubing Pressure	Casing Pressure	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls. 0	

GAS WELL

Actual Prod. Test - MMCF/D 462	Length of Test 24 hours	Bbls. Condensate/MMCF 0	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 610	Casing Pressure (Shut-in) 620	Choke Size 3/4"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

W. W. Baker
Signature
W. W. Baker Administrative Supervisor
Printed Name
10/09/90 (405) 948-4859
Date Telephone No.

OIL CONSERVATION DIVISION

FEB 08 1991

Date Approved
By Brian D. Chang
SUPERVISOR DISTRICT #3
Title

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-101 must be filed for each pool in multiply completed wells.