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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

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

		TO TRAN	SPORT OIL	<u>. AND NA</u>	TURAL G					
Operator Conoco Inc.	Conoco Inc.						APINO. 30-045-08759			
Address 3817 N.W. Expr	esswav.	Oklahon	na City. O	K 7311	2		<u>s</u> -			
Reason(s) for Filing (Check proper box)					es (Please expl	ain)	<u> </u>		 	
New Well		Change in Tr				~ /		_		
Recompletion IX K	Oil	-	ry Gas	Effe	ctive	Date	× 2-	1-91		
Change in Operator	Carlinghead					 				
change of operator give name Mesond address of previous operator	a Operat	ting Lim	ited Part	nership,	P.O. Bo	x 2009,	Amarill	o, Texa	as 79189 •	
I. DESCRIPTION OF WELL	AND LEA			·						
Lease Name Well No. Pool Name, Include Accidental "E" Com 1 Basin				ing Pormution Nation State,			of Lease No. Federal or Fee 3322 C			
Location						90		1112.44		
Unit Letter			ed From The 📿						Line	
Section S Townshi	29	W R	ange //LL	/ ,N	MPM.	Dan.	Juan		County	
II. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTE			RAL GAS	e address to w	blob o	anne of this i	je te ke	-()	
Giant Refining, Inc.		or Condensat	• KX							
Name of Authorized Transporter of Casing	Box 338, Bloomfield, New Mexico 87413 Address (Give address to which approved copy of this form is to be sent)									
armo of Authorized Transporter of Casinghead Clas or Dry Clas XX				P.O. Box 1492, El Paso, Texas 79999						
If well produces oil or liquids, ive location of tanks.	vell produces oil or liquids, Unit Sec. Twp. Rgs. Is a				ls gas actually connected? When ?					
		· · · · · · · · · · · · · · · · · · ·	91/110	1 <u>70</u>	<u>'ろ</u>	l				
this production is commingled with that: V. COMPLETION DATA	rom any our	er lease or poc	n, grve commungi	ing order mum	Det:					
	- (V)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Spudded		Ready to Pr	od.	Total Depth	<u> </u>	l	P.B.T.D.	<u> </u>	1	
Date Spudded Date Compl. Ready to Prod.							r.s.i.U,			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations	-1		· · · · · · · · · · · · · · · · · · ·	•		·····	Depth Casin	g Shoe	· · · · · · · · · · · · · · · · · · ·	
	CEMENTI	NG RECOR	D D	·						
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT .			
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V. TEST DATA AND REQUES	T FOR A	LLOWAE	LE	L				<u> </u>		
OIL WELL (Test must be after r								for full 24 hou	rs.)	
Date First New Oil Rus To Tank Date of Test				Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure			Casing Pressure			Choke Size			
Actual Prod. During Test Oil - 1		I Dila			Water - Bbis.			Gas-MCF		
Loring tion radius test	Oil - Bbis.			Tombi - Dolla	•	=	EPI	FIVE	: 1111	
GAS WELL						IÙ.) 5 6		ש	
Actual Prod. Test - MCF/D	Length of	Cest .		Bbls. Conder	mie/MMCF	· U	Onvity of	Code 99		
	Tollies W.					, -	MAY		W	
eting Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)						
VI. OPERATOR CERTIFIC	ATE OF	COMPL	IANCE		<u> </u>	10221	, -	71 57. 3		
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.				MAY 0 3 1991						
) /	v proge 60	~ *******		Date	Approve	d				
winker				D		7	() A	2-/		
Signahus V.W. Baker	Admini	strativ	e Supr.	Ey_		SUPFO	IVISOPO	ISTRICT	40	
Printed Name			tie	Title					23	
5-1-91 Date	(40	Teleph		1		. –				

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.