

District I
PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104

Revised February 21, 1994

Instructions on back

Submit to Appropriate District Office

5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address CONOCO INC. 10 Desta Drive Ste 100W MIDLAND, TEXAS 79705		OGRID Number 005073
		Reason for Filing Code RC
API Number 30 - 0 25-08936	Pool Name JALMAT YATES GAS	Pool Code 79240
Property Code 003104	Property Name STATE E	Well Number 2

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
1	17	22 S	36 E		1980	SOUTH	660	EAST	LEA

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Lee Code S	Producing Method Code P	Gas Connection Date 2-10-93	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	OG	POD ULSTR Location and Description
022628	TEXAS NEW MEXICO PL CO. P.O. BOX 2528 HOBBS, NM. 88240	0772110	O	E 17 22S 36E
009171	GPM GAS CORP 4001 PEMEROOK ODESSA, TX. 87410	0772130	G	I 17 22S 36E

IV. Produced Water

POD	POD ULSTR Location and Description
0782750	E 17 22S 36E

V. Well Completion Data

Spud Date	Ready Date	TD	PSTD	Perforations
11-12-37	12-23-93	3856	3550	3059 - 3316
Hole Size	Casing & Tubing Size	Depth Bit	Sacks Cement	
15	10 3/4	291	225 SX	
9 7/8	7 5/8	1476	425 SX	
6 3/4	5 1/2	3714	425 SX	
	2 7/8" TBG	2951		

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
2-10-93	2-10-93	2-12-94	24		
Choke Size	Oil	Water	Gas	AOF	Test Method
	0	21	123		P

I hereby certify that the rules 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.

Signature: *Bill R. Keathly*

Printed name: BILL R. KEATHLY

Title: SR. REGULATORY SPEC.

Date: 11-11-94

Phone: (915) 686-5424

OIL CONSERVATION DIVISION

Approved by: *James P. Sexton*

Title: DISTRICT SUPERVISOR

Approval Date: NOV 28 1994

If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED
"AMENDED REPORT" AT THE TOP OF THIS DOCUMENT

Report all gas volumes at 15.025 PSIA at 60°.

A request for allowable for a newly drilled or deepened well must be

accompanied by a tabulation of the deviation tests conducted in
accordance with Rule 111.

All sections of the form must be filled out for allowable requests on
new and recompleted wells.

Fill out only sections I, II, III, IV, and the operator certifications for
changes of operator, property name, well number, transporter, or
other such changes.

A separate C-104 must be filed for each pool in a multiple
completion.

Improperly filled out or incomplete forms may be returned to
operators unapproved.

Operator's name and address
Operator's OQAD number. If you do not have one it will be
assigned and filed in by the District office.

Reason for filing code from the following table:

NW New Well

NC Recession

CH Change of Operator

AO Add oil/condensate transporter

CO Change oil/condensate transporter

AG Add gas transporter

CG Change gas transporter

RT Request for test allowable (include volume

requested)
If for any other reason write that reason in this box.

The API number of the well

The name of the pool for this completion

The pool code for this pool

The property code for this completion

The property name (well name) for this completion

The well number for this completion

The surface location of this completion NOTE: If the
United States government survey designates a Lot Number
for the location use that number in the "UL or lot no." box.
Otherwise use the OGD unit letter.

The bottom hole location of this completion

Lease code from the following table:

F Federal

S State

P Fee

J Nacville

N Navajo

U Ute Mountain Ute

I Other Indian Tribe

The producing method code from the following table:

P Flowing

P Pumping or other artificial lift

MODA/YR that the completion was first connected to a
gas transporter

The permit number from the District approved C-129 for
this completion

MODA/YR of the C-129 approval for this completion

MODA/YR of the expiration of C-129 approval for this
completion

The gas or oil transporter's OQAD number

Name and address of the transporter of the product

The number assigned to the POD from which this product
will be transported by the transporter. If this is a new well
or recompletion and this POD has no number the district
office will assign a number and write it here.

Product code from the following table:
G Gas
O Oil

The ULSTR location of this POD if it is different from the
well completion location and a short description of the POD
(Example: "Battery A", "Jones CPD", etc.)

The POD number of the storage from which water is moved
from the property. If this is a new well or recompletion and
this POD has no number the district office will assign a
number and write it here.

The ULSTR location of this POD if it is different from the
well completion location and a short description of the POD
(Example: "Battery A Water Tank", "Jones CPD Water
Tank", etc.)

MODA/YR drilling commenced

MODA/YR this completion was ready to produce

Total vertical depth of the well

Plugback vertical depth

Top and bottom perforation in this completion or casing
shoe and TD if openhole

Inside diameter of the well bore

Outside diameter of the casing and tubing

Depth of casing and tubing. If a casing liner show top and
bottom.

Number of sacks of cement used per casing string

The following test data is for an oil well it must be from a test
conducted only after the total volume of load oil is recovered.

MODA/YR that new oil was first produced

MODA/YR that gas was first produced into a pipeline

MODA/YR that the following test was completed

Length in hours of the test

Flowing tubing pressure - oil wells

Shut-in tubing pressure - oil wells

Flowing casing pressure - oil wells

Shut-in casing pressure - gas wells

Diameter of the choke used in the test

Barrels of oil produced during the test

Barrels of water produced during the test

MCF of gas produced during the test

Gas well calculated absolute open flow in MCF/D

The method used to test the well:

F Flowing

P Pumping

S Swabbing

I If other method please write it in.

The signature, printed name, and title of the person
authorized to make this report, the date this report was
signed, and the telephone number to call for questions
about this report

The previous operator's name, the signature, printed name,
and title of the previous operator's representative
authorized to verify that the previous operator no longer
operates this completion, and the date this report was
signed by that person