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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

**OIL CONSERVATION DIVISION**

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

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 TRANSPORT OIL AND NATURAL GAS**

**I.**

Operator Conoco Inc.	Well API No. 30-025-31178
Address 10 Desta Drive STE 100 W, Midland, TX 79705	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/> Other (Please explain) Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate <i>Change lease name from SEMU to SEMU Weir Blinebry</i>	
If change of operator give name and address of previous operator _____	

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name SEMU - WEIR BLINEBRY	Well No. 123	Pool Name, Including Formation WEIR BLINEBRY	Kind of Lease State (Federal) or Fee	Lease No. NM 0557686
Location Unit Letter <u>E H</u> : <u>1860</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>EAST</u> Line Section <u>22</u> Township <u>20S</u> Range <u>38E</u> , <u>NMPM</u> , <u>LEA</u> County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> CONOCO INC. SURFACE TRANSPORTATION	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 2587, HOBBS, NM 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> CONOCO INC.	Address (Give address to which approved copy of this form is to be sent) 10 DESTA DR. STE 100W, MIDLAND, TX 79705
If well produces oil or liquids, give location of tanks. Unit <u>M</u> Sec. <u>20</u> Twp. <u>20S</u> Rge. <u>38E</u>	Is gas actually connected? <u>YES</u> When? <u>6-4-92</u>

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-7-91	Date Compl. Ready to Prod. 5-22-92	Total Depth 7050	P.B.T.D. 6610					
Elevations (DF, RKB, RT, GR, etc.) GR 3529	Name of Producing Formation WEIR-BLINEBRY	Top Oil/Gas Pay 5610	Tubing Depth 5759					
Perforations 5610-24, 5658-68, 5672-78, 5690-5708							Depth Casing Shoe 7050	
<b>TUBING, CASING AND CEMENTING RECORD</b>								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	9 5/8	1486	780 C					
8 3/4	7	7050	2710 H					

**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 5-26-92	Date of Test 6-4-92	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 186	Oil - Bbls. 25	Water - Bbls. 65	Gas- MCF 19

**GAS WELL**

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

**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.

*BILL R. KEATHLY*  
Signature BILL R. KEATHLY, SR. REGULATORY SPEC.  
Printed Name \_\_\_\_\_ Title \_\_\_\_\_  
6-4-92 \_\_\_\_\_ 915-686-5424 \_\_\_\_\_  
Date \_\_\_\_\_ Telephone No. \_\_\_\_\_

**OIL CONSERVATION DIVISION**

Date Approved \_\_\_\_\_  
By \_\_\_\_\_  
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-104 must be filed for each pool in multiply completed wells.

30025-31178 BRL

Deviation surveys taken on Conoco's S.E.M.U. #123 well in Lea County, New Mexico:

1860/N + 660/E

22-20-37

<u>Depth</u>	<u>Degree</u>
243	.25
508	.25
742	.25
982	.50
1230	.75
1500	.25
1962	.75
2459	1.00
2951	1.50
3445	.25
3940	1.25
4437	1.50
4664	2.25
4839	1.50
5367	1.00
5890	1.00
6386	1.00
6881	.75
7050	.25

570 10 1000

I hereby certify that I have personal knowledge of the facts placed on this sheet and that such information given above is true and complete.

S. Howard Norton  
Norton Drilling Company

Before me, the undersigned authority, on this day personally appeared S. Howard Norton, known to me to be the person whose name is subscribed hereto, who after being duly sworn, on oath states that he is the drilling contractor of the well identified in this instrument and that such well was not intentionally deviated from the vertical whatsoever.

S. Howard Norton  
S. Howard Norton

SWORN AND SUBSCRIBED TO before me this 26th day of December 1991.



Pat Farrell  
Notary Public in and for  
Lubbock County, Texas