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SANTA FE		L CONSERVATION COMMISSION	Form C-104
FILE	REQUE	ST FOR ALLOWABLE	Supersedes Old C-104 and C- Effective 1-1-35
U.S.G.S.		AND	
LAND OFFICE	AUTHORIZATION TO T	RANSPORT OIL AND NATURAL (GAS
TRANSPORTER GAS			
OPERATOR !			
PRORATION OFFICE			
Cperator			
Conoco I	nc.		
Address			
P.O. Box	460, Hobbs, New Mexico 8	3240	
Reason(s) for filing (Check pro		Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion		Change of corpor	
Change in Ownership			Company effective
		ndensate July 1, 1979.	
If change of ownership give r and address of previous owne			
DESCRIPTION OF WELL	AND LEASE		
Lease Name	Weil No. Poor Name, Inclusin	g Formation Kind of Leas	e Lease No.
N W 51 70 /			
North T.L. Mac	Just 25 FL Mar	De State, Federa	tlor Eso
North CL Mar (Unit 25 EL Mar	Delaware State, Federa	tlor Ess
Location			(C-0695)
Location	1980 Feet From The 5	Delaware State, Federa	(C-0695)
Location		Line and 660 Feet From	(C-0695)
Unit Letter I :	1980 Feet From The 5	Line and(60 Feet From :	The
Unit Letter I; Line of Section 26 DESIGNATION OF TRANS Name of Authorized Transporte	Township 26-5 Ednace SPORTER OF OIL AND NATURAL or Condensate	Line and 660 Feet From S	The County
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APPROVE District Supervisor TITLE.

Chore Size

Gan - MCF

Choke Size

Producing Method (Flow, pump, gas lift, etc.)

Casing Pressure

Bbls. Condensate/MMCF

Cosing Pressure (Shut-in)

water - Bbis.

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Date of Test

Cil-Bbls.

Length of Test

Tubing Pressure (Shut-in)

Tubing Pressure

mille

Division Manager

(Title) 14

NMOCD (5) USGS(2) PARTNERS FILE

Length of Test

GAS WELL

Actual Prod. During Test

Actual Prod. Test-MCF/D

Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

Date First New Oil Run To Tanks

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completes wells