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U.S.G.S.
LAND OFFICE
TRANSPORTER <input type="checkbox"/> OIL
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OPERATOR
PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-105  
Effective 1-1-75

**I. OPERATOR**

Operator: Conoco Inc.

Address: P.O. Box 460, Hobbs, New Mexico 88240

Reason(s) for filing:  New Well  Recompletion  Change in Ownership  Change in Transporter of:  Oil  Gas  Dry Gas  Condensate  Other (Please explain): Change of corporate name from Continental Oil Company effective July 1, 1979.

If change of ownership give name and address of previous owner: \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name: South Eunice Unit - ~~Part~~ 25 Pool Name, Including Formation: Eunice Trvs Queen So. Kind of Lease: State, Federal or Free Lease No.: LC 03013316

Location: Unit Letter P 660 Feet From The S Line and 660 Feet From The E Line of Section 22 Township 22 Range 36 N.M.P.M. lea County

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

Name of Authorized Transporter of Oil  or Condensate : Texas-New Mexico Pipeline Co. Address (Give address to which approved copy of this form is to be sent): Box 1510, Midland, Texas

Name of Authorized Transporter of Gas  or Dry Gas : Petro-Lewis Phillips Petroleum GPM Gas Corporation Address (Give address to which approved copy of this form is to be sent): Eunice, N.M. Odessa, Texas Monument, N.M.

Warren Petroleum Corp. EFFECTIVE February 1, 1992

**IV. COMPLETION DATA**

Designate Type of Completion - (X)  Oil Well  Gas Well  New Well  Workover  Deepen  Plug Back  Same Restn.  Diff. Restn.

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe

**TUBING, CASING, AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

**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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

**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. CERTIFICATE OF COMPLIANCE**

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.

J. J. Mansson  
(Signature)  
Division Manager  
(Title)  
6-78-79  
(Date)

NMOC (5)  
USGSC(2) PARTNERS(2) FILE

OIL CONSERVATION COMMISSION

APPROVED JUL 9 1979, 19

BY Jerry Sifton

TITLE District Supervisor

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 completed wells.

**RECEIVED**

**JUN 25 1979**

**OIL CONSERVATION COMM.  
HOBBBS, N. M.**