

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-11
Effective 1-1-65

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I.

Operator CONOCO INC.	
Address P.O. Box 460, Hobbs, N.M. 88240	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name JICARILLA 22	Well No. 12	Pool Name, including Formation BLANCO MESAUERDE	Kind of Lease State, Federal or Fee INDIAN	Lease No. C-65
Location				
Unit Letter H ; 1650 Feet From The NORTH Line and 850 Feet From The EAST				
Line of Section 15 Township 25 N Range 4 W , NMPM, RIO ARRIBA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
CONOCO INC. SURFACE TRANSPORTATION	Box 1429, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
EL PASO NATURAL GAS CO.	P.O. Box 1492, EL PASO, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 22	Twp. 25 N	Rge. 4 W	Is gas actually connected? yes	When 11-11-88

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	Gas Well <input checked="" type="checkbox"/>	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-21-81	Date Compl. Ready to Prod. 9-9-88		Total Depth 8154'		P.B.T.D. 6825'			
Elevations (DF, RKB, RT, GR, etc.) 7075'	Name of Producing Formation BLANCO MESAUERDE		Top Oil/Gas Pay 5342		Tubing Depth 5800			
Perforations 5342' - 5472' - 5800' - 5896'					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4" 7 7/8"	CASING & TUBING SIZE 8 5/8" 5 1/2" 2 3/8"		DEPTH SET Original Set in well 5800		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)

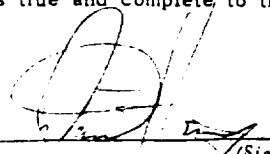
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 276	Length of Test 24 hrs	Bbls. Condensate/MMCF 21 MCF oil	Gravity of Condensate
Testing Method (pilot, back pr.) Flowing	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.


Adm. Supervisor **D.F. Finney**
(Title)
11-11-88
(Date)

OIL CONSERVATION COMMISSION

APPROVED **NOV 21 1988**, 19
BY **Original Signed by FRANK I. CHAVEZ**
TITLE **SUPERVISOR DISTRICT # 3**

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.