Submit 5 Copies Appropriate District Office Appropriate District I DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

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

Santa Fe, New Mexico 87504-2088

<u>.</u>		OTRAN	ISPORT OIL	AND NA	TURAL G		API No.			
Conoco Inc.	Conoco Inc.									
Address 3817 N.W. Expre	essway.	0k1ahoi	ma City, O	K 7311		. <u></u>	··	•		
Reason(s) for Filing (Check proper box)				Oth	es (Please expl	ain)				
New Well Recompletion Change in Operator	Change is Transporter of: Oil Dry Gas Effective Date: 7-1-91 Casinghead Gas Condensate									
 	`		nited Partı	nership,	P.O. Bo	x 2009,	Amarill	o, Texa	as 79189	
U. DESCRIPTION OF WELL AND LEASE										
Lease Name OHIO	Well No. Pool Name, Including			ng Formation Kind State			Federal of Pee NM 02019			
Location	. 79	20				200 -				
Unit Letter : 190 Peet Prom The WILD Line and 100 Peet From The UKSE Line Section 32 Township 38N Range 11W, NMPM, San Juan County										
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS										
Name of Authorized Transporter of Oll Giant Refining, Inc.		or Condense	(XX)	Address (Give address to which approved copy of this form is to be sent) Box 338, Bloomfield, New Mexico 87413						
Name of Authorized Transporter of Casing	thead Gas or Dry Gas XX			Address (Giv	e address to wi	hich approved	copy of this form is to be sent)			
El Paso Natural Gas If well produces oil or liquids,	Unit	Sec. T	wp. Rge.	P.O. Box 1492, El Paso Signal						
ive location of tanks.	Ci.	22 1	38/VI /1W	Ye	, <u>s</u>	i				
f this production is commingled with that from any other lease or pool, give comminging order sumber: V. COMPLETION DATA										
Designate Type of Completion -	· (X)	Oil Well	Cas Well	New Well	Workover I	Deepen	Plug Back	Same Res'v	Diff Res'v	
Data Spudded Data Compl. Ready to Prod.			rod.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth ·			
Perforations					- (<u> </u>	Depth Casin	Depth Casing Shoe		
	TUBING, CASING AND							2611	1131	
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			DE TONE COMENT . LL			
							10 3 1991			
						 	N N	CON	DIA	
V. TEST DATA AND REQUES OIL WELL (Test must be after re				be equal to or	exceed top allo	owable for thi	s depth Doe	COL	,3	
Date First New Oil Rus To Tank	Date of Test			Producing M	thod (Flow, pu	mp, gas lift, d	tc.)			
Length of Test	Tubing Pressure			Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbis.			Water - Bbia.			Gas- MCF			
GAS WELL						· · · ·				
Actual Prod. Test - MCF/D	Length of To	eet .		Bbls. Condensate/MMCP			Gravity of Condensate			
eating Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-In)			Choka Size			
VI. OPERATOR CERTIFICA					OII CON	ISEDV	ATION	חואופור		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information gives above is true and complete to the best of my knowledge and belief.				OIL CONSERVATION DIVISION MAY 0 3 1991						
2	IIV HISTORIO ESS	. . .		Date	Approve	d	4		···	
Signaphre				By 3 1) Chang						
W. W. Baker Administrative Supr.					TitleSUPERVISOR DISTRICT #3					
5-1-91 Date	(40		3120 one No.	11119	·		··		-	

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.