Submit 5 Copies
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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Connection						Well API No.						
Conoco Inc.				<del></del>				30-045-2	4121			
ddress 10 Desta Dr	rive Ste 100	W, Mid	land, T	X 79	705							
eason(s) for Filing (Check pro	per bax)				Oth	et (Piease e	explain)					
ew Well		Change i	n Transporte	r of:			•					
ecompletion	Oil		Dry Gas					·	^			
nange in Operator	Condensat	EFFECTIVE NOVEMBER 1, 1993										
change of operator give name I address or previous operator	·											
DESCRIPTION OF	WELL AND L	FASE										
ease Name	WEED AND DI			Pool Name, Include			Kin	d of Lease	L	Lease No.		
KRAUSE WN FED.		5E		BASIN DAKO			State	State, Federal or Fee		SF 078863		
cation :	17											
Unit Letter	:17	'85 	_ Feet From	The _N	ORTH Lin	• and	880	Feet From The .	WEST	Line		
Section 28	Township 2	8 N	Range	11	. W . NI	MPM.	SAN JUAN	1		County		
	10waaa1p	-	- REAL PORT		, 14	VII IVI,				County		
. DESIGNATION OF				NATU								
ms of Authorized Transports GIANT REFINING		or Conde	osme X	X	1			ed copy of this f		tnt)		
me of Authorized Transporte			or Dry Ga	• (55)				ELD. NM  of this for				
EL PASO NATURAL	•		or Diy Ga	• XX.	1	30X 499		INGTON, N		<i>ine</i> )		
vell produces oil or liquids,	Unit	<del></del>		Twp. Rge.		<del></del>			When ?			
location of tanks.	E	28		11W	YES							
is production is commingled		ther lease or	r pool, give o	comming	ing order numi	)er:						
COMPLETION DA	IA	Oil Wei	ıı l Gee	Well	New Well	Workove	a Donne	Dhan Binch	Same Res'v	Diff Res'v		
Designate Type of Con	mpletion - (X)	JOIL WE	u joses I	. Mett		i warose	r   Deepea	Link Dick	  Sering Yes A	Dill Kes v		
s Spudded	Date Cor	npl. Ready t	o Prod.		Total Depth			P.B.T.D.	<b></b>			
vations (DF, RKB, R7, GR, e	tc.) Name of	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
orations								Denth Casin	Depth Casing Shoe			
· · · · · · · · · · · · · · · · · · ·	·	TUBING	, CASING	AND	CEMENTI	NG REC	ORD					
HOLE SIZE	C,	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
								<del></del>	<del></del>			
TEST DATA AND R	EQUEST FOR	ALLOW	ABLE									
	be after recovery of			and must						is.)		
te First New Oil Run To Tan	k Date of T	`e <b>s</b>			Producing Me	thod (Flow	, pump, gas lift,	ect / Los	B CF # 3	i i		
#								Okara Siza	Clicke Size To 6 1003			
igth of Test	Tubing P	Tubing Pressure				re		100	1306	ال ا		
nual Prod. During Test	Oil - Bbl	Oil - Bbls.				Water - Pbis.			GPNOT CONT.			
•									E Tain			
AS WELL								1				
uai Prod. Test - MCF/D	Length o	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate			
									Control Control Control Control Control Control			
ing Method (pitot, back pr.)	Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size	Choke Size				
								<u></u>				
OPERATOR CER				E		אוו הכ	NSERV	'ATION I	אוצוכ	M		
I hereby certify that the rules Division have been complied	•							A110111	J. V.O.C	/1 <b>\</b>		
is true and complete to the be		_	TOE BOOVE		Doto	Anneo	ved $\frac{0}{}$	CT 2619	193			
<i>?</i> .	<u>.</u>				Dale	Approv	vea	0. 2010				
Rulk	Beach	ly			D.,		~	1	/			
Signature BILL R. KE	ATHIY SR I	REGULAT	ORY SPE	IC.	By_			<del></del>	<del></del>			
Printed Name	111111 19101 1		Title		Title		SUPERV	ISOA DIS	RICT	3		
10 <b>-25</b> -93	9:	<u> 15-686-</u>			inte.	<del>_</del> -						
Date		Tel	ephone No.									

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.