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 OIL CONSERVATION DIVISIONE DISTRICT II P.O. Drawer DD, Artesia, NM 88210 P.O. Box 2088 Santa Fe New Mexico 27504-2022

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

, ED

I.O. DIAWEI DD, ALIEBE, NM 00210		1.0. DOX 2000	/ ~ •			
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410		Santa Fe, New Mexico 87504-2088	12h AD/1021			
		REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
Operator			Well API No.			
	Conoco Inc.		20 1/1/20			
Address						
	3817 N.W. Expre	essway, Oklahoma City, OK 73112	•			

1000 RIO BRIZOS RG., AZZIEC, NM. 8/410	REQU	EST FO	OR ALLOWA	BLE AND	AUTHORIZ	ZATION	/			
I.	7	TO TRA	NSPORT OI	LAND NA	TURAL GA	\S				
Operator					-		API No.			
Conoco Inc.							- 11/5	1. T. 1/2.	, -	
Address					•	<u></u>				
3817 N.W. Expr	essway,	Oklaho	oma City, (OK 7311	2			•		
Reason(s) for Filing (Check proper box)				Oth	er (Please expla	in)	•			
New Well		Change in	Transporter of:							
Recompletion 🖳	Oil		Dry Gas	Elt	27/12	120-6	- 7-	1-91		
Change in Operator	Casinghead	I Gas 🔲	Condensate				·			
If change of operator give name and address of previous operator Mesa	operat	ing Li	mited Part	nership,	P.O. Box	x 2009,	Amarill	o, Tex	as 79189	
II. DESCRIPTION OF WELL	AND LEA	SE							· ·	
Lease Name	Well No. Pool Name, Includi			ing Pormation		Kind	Kind of Lease		Lease No.	
- F. Gelson "35"	'	1	100.511	Dake	ta.	State,	Federal or Fee		/-	
Location				2 3 5 7 6	<u> </u>			<u> </u>	-	
Unit Letter	<u> </u>	ے تن	Feet Prom The	Section Line	and 25	450 F	et Emm The	Ilar	Line	
nr.	4 3						_			
Section 35 Townshi	3CA		Range //LL	N	ирм,	Sur! S	ulin'		County	
III DECIGNATION OF TRAN	Choner									
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		or Condens								
Giant Refining, Inc.		or Concent			e <i>address to whi</i> 8, Bloomt					
Name of Authorized Transporter of Casing	thead Gas		or Dry Gas [XX]	Address (Giw	address to whi	ch approved	come of this for	rm is to be see	mt)	
El Paso Natural Gas				P.O. B	ox 1492,	Fl Paso	n. Texas	79999	**/	
if well produces oil or liquids,	Unit	Sec.	Twp. Rge.	is gas actually		When		1000		
rive location of tanks.	i Ci	35	30N 1/W	Ve		1	•			
f this production is commingled with that it. V. COMPLETION DATA	rom any othe			ing order numb	er:					
V. COMPLETION DATA		Υ	γ	,						
Designate Type of Completion	- (X)	Oil Well 	Gas Well	New Well	Workover E [™] 6 NA 4	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl	Ready to	Prod.	bust Dealt		-n-	P.B.T.D.		1	
		•	1		F-25 (1) 42 423		F.B.1.D.			
Elevations (DF, RKB, RT, GR, etc.) Name		me of Producing Formation		NOVI 4 1991			Tubing Depth			
Perforations										
				OIL CO	DN. DIV	/.]	- rebu Caring	SHOE	T: 3	
	π	JBING, O	CASING AND	CEMENT	ORL)	· · · · · · · · · · · · · · · · · · ·	e Wit.	##	
HOLE SIZE			BING SIZE		DEPTH SET		E City	ARKS CEME	NT 2)	

V. TEST DATA AND REQUEST FOR ALLOWABLE

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this OIL WELL Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.) **Tubing Pressure** Casing Pressure Choke Size Oil - Bbis. Water - Bbis. Gas- MCF

Length of Test Actual Prod. During Test **GAS WELL**

Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Signatura W.W. Baker Administrative Supr. Printed Name Title 948-3120

OIL CONSERVATION DIVISION

MAY 0 3 1991 Date Approved .

n) El By__

SUPERVISOR DISTRICT #3 Title.

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.