

DISTRICT I  
P. O. Box 1980, Hobbs, NM 88240

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

DISTRICT III  
1000 Rio Brazos Blvd., Artesia, NM 87410

OIL CONSERVATION DIVISION

P. O. Box 2088  
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Conoco Inc.	Well API No. 30-045-23256
Address 3817 N.W. Expressway, Oklahoma City, OK 73112-1400	
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change In Transport of: <input checked="" type="checkbox"/> Other (Please explain) Recompletion <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change In Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Recompletion to Pictured Cliffs	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Tank Mountain	Well No. 1	Pool Name, Including Formation Unders. Pictured Cliffs	Kind of Lease State, Federal or Fee	Lease No. SF-078509A
Location Unit Letter <u>P</u> Section <u>29</u> Township <u>32N</u> Feet From The <u>990</u> Line and <u>990</u> Feet From The <u>E</u> Line Range <u>9W</u> NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Giant Refining Inc.	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 606 U.S. Hwy 64, Bloomfield NM.				
Name of Authorized Transporter of Casinghead Gas El Paso Natural Gas Co.	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, TX 79978-1492				
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 29	Twp. 32N	Rge. 09W	Is gas actually connected? Yes	When?

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 X	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 12-26-78	Date Compl. Ready to Prod. 3-27-92 (Recompl)		Total Depth 6225'		P.B.T.D. 3770			
Elevations (DF, AKB, AT, GR, etc.) GL 6807'	Name of Producing Formation Pictured Cliffs		Top Oil/Gas Pay 3664'		Tubing Depth 3654			
Perforations 3664-71', 3673-76', 3683-93', 3696-3710', 3714-16', 3718-29', 3737-47'					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
13 3/4"	9 5/8"		241'		200 sx			
9 3/4"	7" 4 1/2" Liner		4001'		100 sx			
	2 1/16" Tubing		3768' - 6220'		350			

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 Tank	Date of Test 4-01-92	Producing Method (Flow, pump, gas lift, etc.) Flowing
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test - MCF/D 368	Length of Test 24 Hrs.	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-In) 653 #	Casing Pressure (Shut-In) 672 #	Choke Size 25/64

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.

Signature W.W. Baker  
Printed Name W.W. Baker Admin. Supervisor  
Date 04-10-92 Title (405) 948-4859  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 21 1992

By Original Signed by CHARLES GHOLSON

Title DEPUTY OIL & GAS INSPECTOR