

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

RECEIVED
SEP 15 1994
OIL CON. DIV.
DIST. 3

Form C-104
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address CONOCO INC. 10 Desta Drive Ste 100W MIDLAND, TEXAS 79705		OGRID Number 005073
		Reason for Filing Code CO EFFECTIVE 11-1-93
API Number 30 - 0 045-23052	Pool Name BLANCO MESAVERDE	Pool Code 72319
Property Code 015615	Property Name HUBBARD LS	Well Number 2A

II. Surface Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
L	30	32 N	11 W		1790	SOUTH	1110	WEST	SAN JUAN

Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South line	Feet from the	East/West line	County
Loc Code F	Producing Method Code F	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
009018	GIANT REFINERY P.O. BOX 338 BLOOMFIELD, NM. 87413	0431610	O	L 30 32N 11W
007057	EL PASO NATURAL GAS CO. P.O. BOX 4990 FARMINGTON, NM 87413	0431630	G	L 30 32N 11W

IV. Produced Water

POD 0431650	POD ULSTR Location and Description L 30 32N 11W
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	Test Method

I hereby certify that the rules 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: <i>Bill R. Keathly</i>		OIL CONSERVATION DIVISION	
Printed name: BILL R. KEATHLY		Approved by: <i>378</i>	
Title: SR. REGULATORY SPEC.		Title: SUPERVISOR DISTRICT #3	
Date: 9-14-94		Approval Date: SEP 15 1994	
Phone: (915) 686-5424			
If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature	Printed Name	Title	Date

22.	The ULSR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD Water Tank", etc.)	MO/DAYR drilling commenced	MO/DAYR this completion was ready to produce	Total vertical depth of the well	Plugback vertical depth	Top and bottom perforation in this completion or casing shoe and TD if openhole	Inside diameter of the well bore	Outside diameter of the casing and tubing	Depth of casing and tubing. If a casing liner show top and bottom.	Number of sacks of cement used per casing string	The following test data is for an oil well it must be from a test conducted only after the total volume of load oil is recovered.	MO/DAYR that new oil was first produced	MO/DAYR that gas was first produced into a pipeline	MO/DAYR that the following test was completed	Length in hours of the test	Flowing tubing pressure - oil wells	Shut-in tubing pressure - oil wells	Flowing casing pressure - oil wells	Shut-in casing pressure - gas wells	Diameter of the choke used in the test	Barrels of oil produced during the test	Barrels of water produced during the test	MCF of gas produced during the test	Gas well calculated absolute open flow in MCF/D	The method used to test the well:	F Flowing P Pumping S Swabbing If other method please write it in.	48.	The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report	47.	The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operated this completion, and the date this report was signed by that person	16.	MO/DAYR of the C-129 approval for this completion	17.	MO/DAYR of the expiration of C-129 approval for this completion	18.	The gas or oil transporter's OGRD number	19.	Name and address of the transporter of the product	20.	The number assigned to the POD from which this product or recompletion and the POD has no number the district office will assign a number and write it here.	21.	Product code from the following table: G Gas O Oil
1.	Operator's name and address	Operator's OGRD number. If you do not have one it will be assigned and filed in by the District office.	Reason for filling code from the following table: NW New Well RC Recompletion CH Change of Operator AO Add oil/condensate transporter CO Change oil/condensate transporter AG Add gas transporter CA Change gas transporter RT Request for test allowable (include volume requested) If for any other reason write that reason in this box.	4.	The API number of this well	5.	The name of the pool for this completion	6.	The pool code for this pool	7.	The property code for this completion	8.	The property name (well name) for this completion	9.	The well number for this completion	10.	The surface location of this completion NOTE: If the United States government survey designates a Lot Number for the location use that number in the "UL" or lot no. box. Otherwise use the OGD unit letter.	11.	The bottom hole location of this completion	12.	Lease code from the following table: F Federal S State P Fee J Jurisdiction N Navajo U Ute Mountain Ute I Other Indian Tribe	13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift	14.	MO/DAYR that this completion was first connected to a gas transporter	15.	The permit number from the District approved C-129 for this completion	16.	MO/DAYR of the C-129 approval for this completion	17.	MO/DAYR of the expiration of C-129 approval for this completion	18.	The gas or oil transporter's OGRD number	19.	Name and address of the transporter of the product	20.	The number assigned to the POD from which this product or recompletion and the POD has no number the district office will assign a number and write it here.	21.	Product code from the following table: G Gas O Oil			