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Appropriate District Office
DISTRICT | P.O. Box 1984, Hobbs, NM 88240

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

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Antenia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

l.		TO TR	<u>ANSF</u>	PORT O	L AND I	NA.	TURAL	GA:	S							
Operator Conoco Inc.					API No.											
Address										30-025-2	<u>618</u>	2				
10 Desta Drive St	se 100W.	Midl	and.	TX 79	705											
Reason(s) for Filing (Check proper box)						Othe	# (Please	TPlair)	 ,,-						
New Well Recompletion	Oil	Change i	Dry C		17 7	ת מיו מיו די מיו מיו	- CMT TTTT	MOT	III. 60.01		_					
Change in Operator	Caninghead	_	Conde		E	111	TCTIVE	NO	RWRR!	₹ 1, 199	3					
If change of operator give name and address of previous operator										·						
•													-			
II. DESCRIPTION OF WELL Lasse Name	AND LEA	Vell No.	Pool I	Name, Includ	tine Commi				100			 .				
SEMU BLINEBRY		100		NEBRY O	-		\S			of Lease Federal or Fe XXXX	10		31670B			
Location N	700		_							10001		<u> 10 0</u>	010101	_		
Unit Letter	_ :760		_ Feet F	from The $\frac{S}{-}$	OUTH	Line	and	1650) F	est From The	WE	ST	Lin	e		
Section 20	20	S	Ranse	38	K	NN	IPM.	LEA					C			
				_		•							County	_		
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		R OF O		D NATU			address to	منطب		d copy of this						
EOTT ENERGY CORP (0074	1404			ليا						TX. 7						
Name of Authorized Transporter of Casin		EQN	or Dry	Gas	Address (Give	address to	which	approve	d copy of this	form i	10 be se		_		
WARREN PETROLEUM CORP. If well produces oil or liquids,		50) Sec.	Twp	l B						', NM. 8	<u>826</u>	5				
ive location of tracks.		20	20S	38E	is gas acts	esiy Es	connected	7	When	1 ?						
this production is commingled with that	from any other	r lease or	pool, gr	ve comming	ling order n	umb	er:									
V. COMPLETION DATA		(O) 51 11		<u> </u>	1			_,_		· · · · · · · · · · · · · · · · · · ·	-,					
Designate Type of Completion	- (X)	Oil Well	, I	Gas Well	New W	el]	Workover	1	Despes	Plug Back	Sam	e Res'v	Diff Resiv			
Date Spudded	Date Compt.	Date Compl. Ready to Prod.					Total Depth				P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	Name of B	dia E			Top Oil/G	20.11				1						
·	148EDB OF PTO	ams of Producing Formation										Tubing Depth				
renorations	··				· · · · · · · · · · · · · · · · · · ·				Depth Casing Shoe							
		IRING	CAST	NG AND	CEMENT	TIN	C DECC	<u> </u>								
HOLE SIZE		TUBING, CASING AND CASING & TUBING SIZE					DEPTH SET					SACKS CEMENT				
							O O C O C INCHI									
	 			 -	-											
										+			<u>-</u>	_		
. TEST DATA AND REQUES					1											
OLL WELL (Test must be after re	Date of Test		of load		be equal to						for fu	ll 24 hour	3.)			
THE TWO OR THE TO TAKE	Date of less				Producing	IARET	1100 (F16W),	ринир	, gas (41, 6	EC.)						
ength of Test	Tubing Pressure					Casing Pressure					Choke Size					
Actual Prod. During Test Oil - Bbls.					Water - Pols					Gas- MCF						
	Oli - Bois.															
GAS WELL					*					·						
Actual Prod. Test - MCF/D	Langth of Te	A			Bbis. Cond	-	m/MMCF			Gravity of C	cede	neste.		—		
esting Method (pitot, back pr.) Tubing Pressure (Shut-m)					Casing Pressure (Shut-in)					Choka Size						
······································		Cating Pressure (Sma-in)					Caras Sau									
L OPERATOR CERTIFIC	ATE OF (COMP	TIAN	ICF										_		
I hereby certify that the rules and regula	Lions of the O	il Conser	vation			O	IL CO			ATION	עוכ	/iSiO	N			
Division have been complied with and to is true and complete to the best of my k	ner the unions nowledge and	moon give belief.	BE ADOVE	•		4.5	A ====		ÚLL	993						
		00			Da	te /	Approv	ed				······				
Simone Simone	cit k	<u>L</u>			By		CIRIC	INA	LEICA	:5 nu						
SITTED BILL R. KEATHLY SR. REGULATORY SPEC.						By CIRIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR										
Printed Name 12-8-93	915-F	 386-54	Tule 124		Titl	e_										
Date			phone N	lo.												
					11											

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
- 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.