NO. OF COPIES RECEIVED			
DISTRIBUTION	· -	NSERVATION COMMISSION	Form C-104
SANTA FE	REQUEST F	FOR ALLOWABLE	Supersedes Old C-104 and C-1 Effective 1-1-55
FILE		AND	
U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATURAL GAS	•
LAND OFFICE			
TRANSPORTER OIL			
OPERATOR			
PROBATION OFFICE			
Operator			
Conoco Inc.			
Attress			
	Hobbs, New Mexico 8824		
Reasons, for thing (Sec. proper box)		Other iPlease explain,	ć
New Well	Change in Transporter of:	Change of corporat	
Recompletion	Ott Dry G.is		mpany errective
Change in Ownership(Pustnahead Gus Conden	sate July 1, 1979.	
If change of ownership give name			
and address of previous owner			
	PACE		
DESCRIPTION OF WELL AND I	.FIASE. Net: No., Poor Name, Including of	ormation Kina of Lease	Lease No.
- 1 11 1 10 1	24 Eumont Vates	TRUS Queen State, Federa, or	Fee Patatod
Eumout Hardy Duit	-		. 1
M lolat) Feet From The 5 L.a	e and 660 Feet From The	ω
Unit Letter / ; _ VVC			
Line of Section 3/ Tow	mship 20-5 Range	38-E, NMPM, Les	3 County
		·	
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S Address (Give address to which approved	convoletic form to to be sent!
Name or Authorized Transporter of Cil	or Congensate	Address (Give address to which approved	Me 1 leve-
Shell Pipeline	(cmpany	Address (Give address to which approved	i convoithes form is to be sent
Name of Authorized Transporter of Cas	ingneda Gas or Dry Gas	Address to which approved	= = = = = = = = = = = = = = = = = = =
Warren Petroleum	1 (or poration	is gas actually connected? When	namen 10.29
If well produces oil or liquids,	Unit Sec. Twp. Rge.	is gas dotadily commercial	•
give lacation of tanks.			
If this production is commingted wit	th that from any other lease or pool,	give commingling order number:	
. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back - Same Res'v. Diii. Res'
Designate Type of Completion	on = (X)		
Care Sportsed	Date Compi. Ready to Prod.	Total Deptin	P.a.T.D.
Date Spudged	Date Compi. Ready to Prod.	Total Depth	P.B.T.D.
	Date Jompi, Ready to Prod. Name of Producing Formation	rotat Beştir	P.B.T.D. Tubing Cepth
Date Spadaed Elevations (DF, RKB, RT, GR, etc.)		Top Oti/Gas Pay	Tubing Cepth
Elevations (DF, RKB, RT, GR, etc.,		Top Oti/Gas Pay	
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Cepth
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oti/Gas Pay	Tubing Depth Depth Casing Shoe
Elevations (DF, RKB, RT, GR, etc.) Perforations	Name of Producing Formation	Top Oil/Gas Pay	Tubing Cepth
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation TUBING, CASING, AN	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
Elevations (DF, RKB, RT, GR, etc.) Restorations	Name of Producing Formation TUBING, CASING, AN	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
Elevations (DF, RKB, RT, GR, etc.) Restorations	Name of Producing Formation TUBING, CASING, AN	Top Oil/Gas Pay	Tubing Depth Depth Casing Shoe
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HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks	TUBING, CASING, AN CASING & TUBING SIZE OR ALLOWABLE (Test must be able for this d	Top Oli/Gas Pay D CEMENTING RECORD DEPTH SET after recovery of total volume of load oil are the or be for full 24 hours) Producing Method (Flow, pump, gas lift.	Tubing Depth Depth Casing Shoe SACKS CEMENT ad must be equal to or exceed top alle
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This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells. Fill out only Sections I. II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

NMOCD (5) PARTNERS FILE

(Signature)

Division Manager