NE	TATE OF NEW MILARD			form L-104 Revised 10-1-70			
				6-NMOC	C-Artesia		
	DIST 0 ID UT IDN	SANTA FE, NEW		6-NMOCC-Artesia 1-J.L.Conquest-Ft. Worth			
	V.8.U.8.			l-File			
	LAND OFFICE	REQUEST FOR			Rateria		
	DPERATOR 1	AN AUTHORIZATION TO TRANSP	-	. GAS	AUG 2 3 1981		
	PADRATION OFFICE			0 . C. D.			
	Threshold Devel			ARTESIA, OFFICE			
1400 Gihls Tower West, Midland, Texas 79701 Reason(s) for filing (Check proper box) Other (Please explain)							
	New Well X Change in Transporter of: CASINCHEAD GAS MUST NOT BE						
	Recompletion	Oil Dry Gas	• ELARED A	TER	0-1-81	306	
	Change in Ownership	Casinghead Gas Condeni	IS OBTAINI	EXCEP	z-567 Until 1-	1-82	
	If change of ownership give name and address of previous owner		Ex # 2-59	g unt	4 821		
Well No. Pool Name, Including Polymonian						Leose Ist	
	Conoco "7" State	3 East Millman	Queen Grayburg Sto	te, Federal	or Foo State	B-8096	
Location							
	Unit Letter E: 1900 Feet From the <u>HOP CH</u> Chie Chie Chie Chie						
	Line of Section 7 Tow	nship 195 Range 2	9Е , ммрм,	Eddy		County	
т	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	S			he cantl	
1.	Name of Authorized Transporter of Cil						
	CONOCO, INC. Name of Authorized Transporter of Cas	inghead Gas or Dry Gas	P.O.Box 2587, Address (Give address to w	HODDS	d copy of this form is to	be sent)	
	Name of Authorized Transporter of Cashiqueer Cos						
	If well produces oil or liquida,	L 7 195 29E	ls gas actually connected?	i When I	•		
	give location of tanks. If this production is commingled with		give commingling order nu	mber:			
٧.	COMPLETION DATA	Oil Well Gas Well		Deepen	Plug Back Same Res"	. Diff. F	
	Designate Type of Completion	0	x		 		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth 3607		P.B.T.D.		
	3/21/81 Elevations (DF, RKB, RT, GR, etc.)	7/20/81 Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth		
	3379.1' GR	Grayburg	2142'		2336 Depth Casing Shoe		
	Perforations	2-22391			3570'		
	2142-2172", 2202-2239" TUBING, CASING, AND		CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMI		
	12-1/4"	<u>8-5/8"</u> 4-1/2"	432'	,	400 SX CIASS		
	7-7/8"	4-1/2			800 sx Class		
		2-3/8"	23361		None	ceed top 6.	
¥.	IEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of social volume of load oil and must be equal to or exceed top a able for this depth or be for full 24 hours)						
	OIL WELL Contage Factor	Date of Test	Producing Method (Flow, pi	ump , gos li fi	, etc.)	Ď	
	7/28/81	8/24/81	Pump Casing Pressure		Choke Size	11. 7.	
	Length of Test 24 hours		0		N/A	<u> </u>	
	Actual Prod. During Test	Dil-Bble.	Water-Bbls.		Gas-MCF	2 July	
	50 BO, 125 BW	50	125			U U	
	GAS WELL			<u> </u>	Gravity of Condensate	Ц	
	Actual Prod. Teet-MCF/D	Length of Test	Bbls. Condensute/MMCF				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size		
				ISERVAT	ION DIVISION		
	CERTIFICATE OF COMPLIANC	SEP 3 1981					
	I hereby certify that the rules and regulations of the Oll Conservation Division have been complied with and that the information given		IN a gresset				
	above is true and complete to the	is in two and complete to the best of my knowledge and belief.		TITLE SUPERVISOR DISTRICT I			
	· .	•					
	Joans a. Redma	This form is to be filed in compliance with MULE 1104. If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviat- tests taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for allo					
	Signa (Signa						
	Engineer Assistan						
	(Tù	able on new and recompleted werrer and M for theorem of own					
August 24, 1981			Fill out only Sections I. II, HI, and VI for the product of conditi- well name or number, or transporter, or other such change of conditi- Separate Forms C-104 must be filed for each pool in multi,				
	•	Separate Forma C completed wells.	- ava 10000	•			