

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

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

RECEIVED

JUL 26 1993

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Conoco Inc. ✓	Well API No. 30-015-27378
Address 10 Desta Drive Ste 100W, Midland, TX 79705	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Other (Please explain)	
Recompletion <input type="checkbox"/> Change in Transporter of: <input 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"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name DAGGER DRAW	Well No. 17	Pool Name, including Formation NO. DAGGER DRAW UPPER PENN	Kind of Lease State, Federal or Fee	Lease No. FEE
Location Unit Letter H : 1665 Feet From The NORTH Line and 660 Feet From The EAST Line Section 30 Township 19 S Range 25 E , NMPM, EDDY County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> AMOCO PIPELINE	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 702068, TULSA, OKLA. 71470					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS 66 NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) 4001 PEMBROOK, ODESSA, TX. 79760					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 19	Twp. 19S	Rge. 25E	Is gas actually connected? YES	When? 7-15-93

If this production is commingled with that from any other lease or pool, give commingling order number: R-9522-A

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 4-20-93	Date Compl. Ready to Prod. 7-13-93	Total Depth 8100	P.B.T.D. 8036					
Elevations (DF, RKB, RT, GR, etc.) GL 3546	Name of Producing Formation CISCO CANYON	Top Oil/Gas Pay 7654	Tubing Depth 7900					
Perforations 7650 - 7827			Depth Casing Shoe 8096					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 14 3/4	CASING & TUBING SIZE 9 5/8	DEPTH SET 1105	SACKS CEMENT 1100 SX Post ID-2					
8 3/4	7	8100	1300 SX 8-6-93					
	2 7/8	7900	comp & BK					

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 7-15-93	Date of Test 7-19-93	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 409	Oil - Bbls. 150	Water - Bbls. 123	Gas - MCF 570

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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 BILL R. KEATHLY SR.
Printed Name
7-19-93 Title
915-686-5424
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 26 1993

By

Title

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 with Rule 111.
- 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.