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

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

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	TOTRA	NSPORT OIL A	AND NATURAL	GAS Wall Al	ot No.		 1	
Operator Conoco Inc.		30	300390509900					
Address 3817 N.W. Expre	ssway, Oklah	oma City, OK	73112			· · · · · · · · · · · · · · · · · · ·		
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator		Transporter of: Dry Gas Condensate	Other (Please o	explain)				
change of operator give name and address of previous operator						······································	· · · · · · · · · · · · · · · · · · ·	
I. DESCRIPTION OF WELL A	AND LEASE							
Lease Name N. E. HAYNES	Well No.	Pool Name, including			f Leane Pederal of Fee D/A/	C-36		
Location Unit Letter	: 1606	Feet From The	Line and	928 Pg	et From The	W	_Line	
Section 22 Township	24N	Range Jus	, NMPM,	RIOA	icki 154	Co	eunty	
III. DESIGNATION OF TRAN	SPORTER OF O	IL AND NATUR	AL GAS Address (Give address	aliah amananad	come of this form	is to he sent)		
Name of Authorized Transporter of Oil OIANT REFINITE CO Name of Authorized Transporter of Daging ONOCO LNC.		or Dry Gas	Address (Give address Address (Give address 18/17 N.W. Extended to the second to the s	THSDALE RE In which approved DICESSWAY	copy of this form OKIAHOMA	is to be send	73/12	
If well produces oil or liquids, give location of tanks.	P 16	124W15W	4c3	I	~~			
If this production is commingled with that	from any other lease o	r pool, give commingli	ng order fumber:	R-52	02			
IV. COMPLETION DATA	Oil We	II Gas Well	New Well Workon	er Deepen	Plug Back Sa	me Res'v Ni	l Res'v	
Designate Type of Completion Date Spudded	- (X) Date Compl. Ready	to Prod.	Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Pay		Tubing Depth	Tubing Depth		
Perforations					Depth Casing	Shoe		
	TUBING	, CASING AND	CEMENTING RE	CORD	, <u>, , , , , , , , , , , , , , , , , , </u>	CKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE		DEPTH	361				
					<u> </u>			
	 							
V. TEST DATA AND REQUE	ST FOR ALLOV	VABLE	be equal to or exceed	op allowable for th	is depth or be fo	full 24 hours.)		
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test	ne of total ou and made	Producing Method (F	ow, pump, gas lift,	elc.)			
Length of Test	Tubing Pressure		Casing President	GEIA	Size	ece!	WEF	
Actual Prod. During Test	Oil - Bbls.		Water - But A.	JG 2 9 1990	Gita	SEP241	non il	
GAS WELL			QIL	CON. D	Oravity of Co	·	5.00	
Actual Prod. Test - MCF/D	Length of Test		Bbis. Condentate/MI	DIST. 3	O	L CON.	DIA	
Testing Method (pitot, back pr.)	Tubing Pressure (S	hut-in)	Casing Pressure (Shu	t-in)	Choke Size	Dist.	3	
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 beat of my knowledge and belief.			1	OIL CONSERVATION DIVISION Date Approved SEP 2 5 1990				
45 Balon			Ву	3	n) d			
Signature J. E. Barton Printed Name		ative Supr.	Title	SUPE	RVISOR DI	STRICT #	3	
Date	(405)	948-3120 Telephone No.						

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.