NO. OF COPIES RECE	LIVED	. 5				
DISTRIBUTIO	ON.					
SANTA FE		T				
FILE						
u.s.g.s.						
LAND OFFICE						
IRANSPORTER	OIL	1				
I RANGO ON LER	GAS					
OPERATOR		12				
PRORATION OF	FICE	<u> </u>	<u>i</u>			
Conoco Inc.						
l .	.O. B					
Reason(s) for filing New Well Becompletion	(Check	prope	r box)			
Change in Ownershi	Ē					

	DISTRIBUTION		SERVATION COMMISSION	Form C-124 Supersedes Did C-104 and C-110			
-	SANTA FE		OR ALLOWABLE AND	Effective 1-1-65			
-	U.S.G.S.		SPORT OIL AND NATURAL GA	AS			
	LAND OFFICE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	IRANSPORTER GAS /						
-	OPERATOR 1						
٠ ــــ	PRORATION OFFICE						
1	Conoco Inc.						
L	Address						
	P.O. Box 460, Hobbs, New Mexico 88240 Other (Please explain)						
- 1	Reason(s) for filing (Check proper box) New Well	Change of compared page					
	Recompletion Cil Dry Gas Continental Oil Company effective						
Ĺ	Change in Cwnership Castinghead Gas Condensate July 1, 1979.						
	f change of ownership give name						
а	and address of previous owner						
	DESCRIPTION OF WELL AND L. Lease Name	EASE. Neil No., Poor Name, Including For					
İ	AXI Apache N	6 Blanco Picture	Cliffs, So. State, Federal	CIFEE FNDIAN C-121			
	Location P . 990	\	and 990 Feet From T	<i>E</i>			
	Unit Letter;						
	Line of Section Town	nship 25-N Range	4-W, NMPM, Rio	Heriba County			
	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS					
1. [Name of Authorized Transporter of Oll	or Condensate	Address (Give address to which approx	ed copy of this form is to be sent;			
	Continenta Name of Authorized Transporter of Casi		Adaress (Give address to which approv	ved copy of this form is to be sent)			
1	6 as (ompany of	New Mexico	1201 Elm St. K	Dallas Texas 75270			
-	If well produces oil or liquids,	Unit Sec. Twp. Ege.	Is gas actually connected? Whe	en			
	give location of tanks.						
τ. 1	If this production is commingled with COMPLETION DATA	h that from any other lease or pool, g	ive commingling order number:				
' [Designate Type of Completion		New Well Workover Deepen	Plug Back Same Res/v. Dift. Res/v.			
	Date Spuded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.			
	Date opiaced						
	Elevations (DF, RKB, RT, GR, etc.,	Name of Froducing Formation	Top Oil/Gas Pay	Tubing Depth			
	Perforations			Depth Casing Shoe			
		TUBING, CASING, AND CASING & TUBING SIZE	CEMENTING RECORD DEPTH SET	SACKS CEMENT			
	HOLE SIZE	CASING & TOBING SIZE					
v.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed to able for this depth or be for full 24 hours)						
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas it	ift, etc.j			
	Date First Hew Oil Hair Fe Faire			Choke Size			
	Length of Test	Tuping Pressure	Casing Pressure	Choke Size			
	Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MOF			
				- FORTH			
	CAC IETA						
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/MMCF	Gravity of Contensate			
			Casing Pressure (Shut-in)	Chese Size JUN 19 1979			
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Date 12)	OIL CON. COM			
VI.	CERTIFICATE OF COMPLIAN	CE	OIL CONSERV	ATION COMMISSION PIST. 3			
		APPROVED JUN 1 9 1979					
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Criginal Signed by	BY Criginal Signed by A. R. Kendrick			
			;				
			TITLE SUPERVISOR DISTRICT # 3				
	7/1///	man 2 MC.	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened				
Division Manager			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 allow-				
							///.
	NMOCD (5) Aztec (D)	atei					
	FILE		Separate Forms C-104 must be filed for each pool in multiply completed wells.				