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

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

I.									ZATION				
Operator	!	UIHA	WS P	UHIC	OIL AND	NAI	UHA	L G/		API No.			
Conoco Inc.						300392017900							
Address 3917 N W Evne	acewa v	Oklah.		City	OV 7	2112		•					
3817 N.W. Expr Reason(s) for Filing (Check proper box)	essway,	UKTAII	Ulik _	city,	/	3112		<u>-</u>					
New Well		Change in	Tour	orter of:	U	Othe	t (Pleas	е ежріа	un)	•			
Recompletion	Oil		Dry G		j								
Change in Operator	Casinghead		Conde		7								
If change of operator give name				~	<u> </u>								
and address of previous operator				- ,					· · · · · ·				
II. DESCRIPTION OF WELL Leage Name			Poc: N	lame, Inch	urline Poem	etion .			¥ ind	of Lease		ease No.	
AKI Arache J			ell No. Poo Name, including Pometion 14 E-20-CHACKA (GA									47	
Location		<u></u>	42.1		صميم		<u> </u>	<i></i>	1,779	NO TITIO		' /	
Unit Letter	: 14	20	Fee P	rom The .	<u>5</u>	_ Line	and	110	70	Feet From The	E	Line	
Santan 7 Tamati	. 25	٠,	n	5	ىت				· 1.			_	
Section Township	, 20		Ratigo			, NM	IPM,		ID WH	crecis4		County	
III. DESIGNATION OF TRAN				D NAT								<u></u>	
Name of Authorized Transporter of Oil		or Conden	este	KX.						d copy of this			
SIGNOT REFINING Co. Name of Authorized Transporter of Casinghead Gas. or law					2373	Address (Give address to which approved copy of this form is to be sent)							
		الا	or I Ty	Gas KY	Addre				_/ II -		form is to be si	mi) 73	
GAS (bandany DEN) If well produces oil or liquids,			Tw ₁ .	7	170		: 184			FIETEL, A	M 8 14	<u>J</u>	
give location of tanks.	, out 1:	- 	, . •	j K	' I ' .	actually ALX	connec	ued 7	Whe	4 7			
If this production is commingled with that i	from any other	r lease or p	pool, gi	ve commi								·	
IV. COMPLETION DATA		·			V								
Designate Type of Completion	- (X)	Oil Well		Gas Well	New	Well	Worko	ver	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl.	Ready to	Pro:		Total	Depth I				P.B.T.D.	1		
Planta (DE DEB DE CD)	ļ				1	10122 K							
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	ducing Fo		1	lopo	I/Gas P	y			Tubing Dep	th	•	
Perforations					<u> </u>	<u> </u>				Depth Casing Shoe			
				<u>:</u>					·				
HOLEGIZE					D CEMI				D				
HOLE SIZE	CASING & TUBIN 3 SIZE					DEPTH SET					SACKS CEM	ENT .	
											·		
								,					
V. TEST DATA AND REQUES OIL WELL (Test must be after n						• •		••					
OIL WELL (Test must be after no Date First New Oil Run To Tank	Date of Test		oy io la	ou ana m					mp, gas lift,		jor juli 24 nou	ra.)	
						#		on 198					
Length of Test	Tubing Press	Rure				10-4		IV		Choke Size			
Assert Band Davidso Torr	01 51				1177	DAIA				Gas- MCF			
Actual Prod. During Test	Oil - Bbls.					TOC.	Γ 2	199	0	Cas- MCF			
GAS WELL	•	-			A	11 8	7/2	<u> </u>	DIV.			· · · · · · · · · · · · · · · · · · ·	
Actual Prod. Test - MCF/D	Length of To	ook .		, · <u>-</u>	B612.	onden		ČĘ,	<i>7</i> 1 7	. Ceryly of	Condensate		
	Total Total	724	<u> </u>	•		, No.	Ø131	. J				* ;	
Testing Method (pitot, back pr.)	Tubing Pres	-ue (3 00	-m <i>)</i>		Central	ricali	re (Shut	-(E)		Choke Size	•	,	
VI. OPERATOR CERTIFIC	ATE OF	СОМР	LIAR	NCE	_				_	1			
I hereby certify that the rules and regula				. —		C)IL C	NO	ISERV	/ATION	DIVISIO	ON	
Division have been complied with and	that the inform	nation give		e	- .					OCT 03	1000		
is true and complete to the best of my l	unowiedge sind	i belief.				Date	Appr	dve	d	00103	リンプリ		
WW Roka									_	. \			
Signature	^ d=	.+	<u></u> -			Ву		· · · · · · · · · · · · · · · · · · ·	3.	· · · · · · · · · · · · · · · · · · ·	Laws /		
Printed Name	Adminis	_	THE		║.	Title_			SUPER	VISOR DI	STRICT	F 3	
9-10-90	(40!		-3 L2		.	ı ill e _							
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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.