NO Drawer DD, Artesia, NM 88211-0719

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

OIL CONSERVATION DIVISION

Instructions on back Submit to Appropriate District Office

District III 1000 Rio Brazzo District IV	s Rd., A	ztec, N	VM 87410	•	O.	Santa F	PO E	Box 2	2088		ION	Sub	mit to A	_	iate Distric	5 Copie		
PO Box 2088, 8 I.	Santa Fc,				FOR A	LLOWAE	BLE .	ANE) AU	THOR	IZATI	ON TO T	L RANS			CLFOR.		
I. REQUEST FOR ALLOWABLE AND AUTHORIZAT Operator name and Address													¹ OGRID Number					
CONO	CONOCO INC 10 DESTA DR. STE 100W													005073 Reason for Filing Code				
MIDL	7970		CH (EFFECTIVE 3-1-95)															
1/			1	CO (RFFECTIVE 4-1-95)														
30 - 0 39-07300					BLANCO MEASVERDE								72319					
16608					SAN JUAN 28-7 7.							* Well Number						
	II. 10 Surface Locati				- MAI										53			
Ul or lot no.			Township	_	Range	Lot.ldn Fe		from th	ie	North/South Line		Feet from the	East/V	Vest line	Cou	inty		
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UL or lot no.	L or lot no. Section		Township		Range	Lot Ida	Lot Ida Feet		from the		outh line	Feet from the	East/V	Vest line	Cou	anty		
12 Lee Code F	13 Pro		Method (Code	Gas	Connection Dat	le	" C-12	9 Perm	i Number		C-129 Effective	Date	"с	-129 Expirati	ion Date		
L	ınd G		ranspo	rte	rs				· · · · · · · · · · · · · · · · · · ·			· · · · · ·		1	··· . · · · · · · · · · · · · · · · · ·			
	" Transporter OGRID			19 Transporter Name and Address					²¹ POD ²¹ O/G			¹² POD ULSTR Location and Description						
- P.			O BOX 4289						798110 0			L 28 28N 7W						
007057 EL PASO P.O. BOX			NATURAL GAS CO.					. 98/30 g			L 28 28N 7W							
009018 GIANT R				ION, NM 87499				76	= C. I									
P.O. BO BLOOMFI			BOX OMFIEI	K 338 ELD, NM 87413				×	98//0 0 L 28 2 RFFECT									
1000 000000000000000000000000000000000																		
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V. Well	Comp		on Dat	ta	24 Ready D			:	'TD			" PBTD			N.D. 4			
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VI. Well Test Data													- India com monte					
				a Delivery Date 24 Test Date				<u> </u>	37 Test Length			" Tog. Pressure DELO" Seg. Pressure						
										_								
⁴⁴ Choke Size			41 Oil 42 Wate			Water	Δ G _i		19	~ 44 ,	··· AOF		4 Test Method					
	the inform					Division have be applete to the bes				ດ	IL CO	NSERVA	TION	DIVI	SION			
Signature:	Bi	ام ا	R.S.	6	ac)	ch.			Approved by:									
Printed name: BILL R. KEATHLY										Tide: SUPERVISOR DISTRICT #8								
Title: SR REGULATORY SPECIALIST									Approval Date: FEB 1 7 1995									
Date:	2-	2 5-9	95		Phone:	Phone: (915) 686-5424							100.					
" If this is a	change	of ope	rator fill i	n the	OGRID av	mber and nam	e of the	e previo	ous oper	ator	0077	8						
) A Prese	ious ()	perator Si	ignal	lure				Print	ed Name				Title		Date		
			aw			Bus	1-1	, ´≤	لحر	ی تح	, nv (TC	cardi			2/15/9			