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

SHE IN ITEM MELLIN Energy, Minerals and Natural Resources Department

DISTRICT # P.O. Drawer DD, Artesia, NM 84210

OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

L		10 170	111210	ni Oil	. AND NA	UNAL G	~~	H AM No			
Operator Conoco, Inc.								3004506613			
Address											
10 Desta Drive, Sui	te 100	W Mid	land,	<u>TX 7</u>	9705		-1-1				
Resson(s) for Filing (Check proper box)		Chance in	Transport	er of:	☐ Othe	t (Please cap)	204)				
New Well Change in Transporter of: Recognistion Dry Gas Effective Date October 1, 1993											
Change in Operator X Casinghead Gas Condensate											
ond address of previous operator ARCO 011 and Gas Company, 1816 E. Mojave, Farmington, New Mexico 87401											
TI DESCRIPTION OF WELL AND LEASE											
Lesse Name	Well No. Pool Name, Inchu			os, lackudi	•			ed of Lease se, Federal or Fee	_	SF078673	
Schlosser WN Fed	ed 7 Basin)akota			31078073			
Location Unit Letter P : 1000 Feet From The South Line and 800. Feet From The East Line											
Unit LetterP					Line				T		
Section 10 Township 27N Range 11W NMPM,								San	Juan	County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil or Condensate					Address (One and any in which approve copy of the John a to conty						
Meridian Oil Company Name of Authorized Transporter of Caringhead Gas or Day Gas X					P.O. Box 4289 Farming Address (Give address to which approved copy of				NM m is to be a	87401 (**)	
Name of Authorized Transporter of Casing EL Paso Natural G				•				mington NM 87499			
Y well moduces oil or liquids,	Unit	Sec.	Top					hea 7			
rive location of tanks.	P	10	27N	11W	Yes						
If this production is commingled with that I	from say of	her lease or	boar Bye	COMMENTS	raf com servin						
		Oil Well	G	s Well	New Well	Workover	Deepe	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	J Bandry N			Total Depth		<u> </u>	P.B.T.D.		_L	
Date Spudded	Date Compl. Ready to Prod.										
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth	Tubing Depth		
								Depth Casing	Shoe		
Performices											
TUBING, CASING AND									SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET						
	-										
V. TEST DATA AND REQUES	TFOR	ALLOW	ABLE		<u></u>						
OIL WELL (Test must be after to	ecovery of	local volume	of load oi	and must	be equal to or	exceed top all	owable for	this depth or he fo	- Juli 24 Mil	er) 30 473	
Date First New Oil Rua To Tank					Producing Me	shod (Flow, p	rub' las n	pr. act Ju			
Length of Test	Tubing Pressure				Casing Pressu	R		Choke Size	7	993 	
League or real								Gar MCF		4.15.9	
Actual Prod. During Test	Oil - Bhis			Water - Bbis.					ه ۱۰ و د		
					J				-A		
GAS WELL Actual Frod Test - MCF/D	Leagth of	Test			Bbis. Conden	BIE/MMCF	• .	Gravity of Co	ndensus		
					Casing Pressure (Shut-is)			Choke Size			
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-m)				Citing Meranic (minran)						
M OPERATOR CERTIFIC	ATE	F COM	PLIAN	CE	1		<u> </u>	/ATION 5	71/11/21/	N	
VL OPERATOR CERTIFICATE OF COMPLIANCE 12 include certify that the rules and regulations of the Oil Conservation					OIL CONSE - JATION DIVISION						
Division have been bompiled with and that the information gives above is true and complete to the best of my knowledge and belief.					OCT 7 1993						
Biel R. Searly					Date Approved						
But & Xearly					By_	By But Chang					
BILLR Keathly Sr. Regulatory Spac.					-, -	SUPERVISOR DISTRICT #3					
Printed Name 7-30-73 915-656-5424					Title						
9-30-93			iephone N								
Property and the second											

- 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.