

NO. OF COPIES RECEIVED	5
DISTRIBUTION	
SANTA FE	
FILE	1
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	3
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Oils C-104 and C-105
Effective 1-1-65

Operator	Conoco Inc.
Address	P.O. Box 460, Hobbs, New Mexico 88240
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change of corporate name from Continental Oil Company effective July 1, 1979.
Recent location ☐	
Change in Ownership ☐	
Change in Transporter of Oil ☐	
Change in Transporter of Gas ☐	
Change in Operator ☐	

If change of ownership give name and address of previous owner Continental Oil Co. *Spec. name change only*

DESCRIPTION OF WELL AND LEASE					
Lease Name	Well No.	Formation	Kind of Lease	Lease No.	
Conoco 29-4	1	Pictured Cliffs	State, Federal or Fee	NM 18321	
Location					
Unit Letter	K	1720	Feet From The	S	
Line and	1510	Feet From The	W		
Line of Section	22	Township	29N	Range	4W
			NMPM	Rio Arriba	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil ☐	or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Gas ☐	or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)				
Northwest Pipeline Corp.		Box 1526, Salt Lake City, Utah				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
					NO	

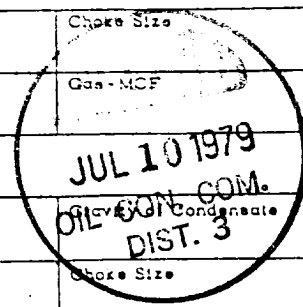
If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Diff. Reservoir
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (D.F., RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Perforations			Depth Casing Shoe					

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL	(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)		
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size



VI. CERTIFICATE OF COMPLIANCE

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.

[Signature]
(Signature)

Division Manager

(Title)

6-11-79

(Date)

NMOC (5) Aztec

FILE

USGS-DURANGO(2)

OIL CONSERVATION COMMISSION

APPROVED 1979
Original Signed by A. L. Hendrick
BY _____

TITLE Supplemental Report # 2

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened 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 allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.