

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator CONOCO INC.		Well API No. 30-045-27879
Address 3817 N. W. Expressway, Oklahoma City, Oklahoma 73112-1400		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Note: New connection for coal seam gas	
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Vandewart "A"	Well No. 13	Pool Name, including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee Federal	Lease No. SF-078502
Location Unit Letter N : 1090 1150 Feet From The South Line and 790 Feet From The West Line Section 13 Township 29N Range 8W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Co.	30th Street, Farmington, NM 87401					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					No	A.S.A.P.

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 11-06-90	Date Compl. Ready to Prod. 12-05-90		Total Depth 3720' 3728'		P.B.T.D. 3680' 3683'			
Elevations (DF, RAB, RF, GR, etc.) GR 6934'	Name of Producing Formation Fruitland		Top Oil/Gas Pay 3330' 3432'		Tubing Depth 3421'			
Perforations 3422-28', 3452-55', 3460-64', 3510-14', 3518-29', 3535-41', 3545-58'					Depth Casing Shoe 3718' 3728'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8"		DEPTH SET 260' 261'		SACKS CEMENT 225350 SXS			
7 7/8"	5 1/2"		3718' 3728'		795675 SXS			
	2 3/8" tubing		3421'					

V. 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 Tank	Date of Test 12-13-90	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls. 1.7 117	Gas - MCF MAR 01 1991

GAS WELL

Actual Prod. Test - MCF/D 52	Length of Test 24 hours	Bbls. Condensate/MMCF 0	Gravity of Gas 1.167
Testing Method (pilot, back pr.) Back pressure	Tubing Pressure (Shut-in) 746	Casing Pressure (Shut-in) 745	Choke Size 3/4"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature W.W. Baker
Printed Name W.W. Baker, Administrative Supervisor
Date 1/16/91 Telephone No. (405)948-4859

OIL CONSERVATION DIVISION

Date Approved MAR 04 1991
By [Signature]
Title SUPERVISOR DISTRICT #3

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.