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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION OFFICE	

NEW MEXICO OIL CONSERVATION COMM. ON
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Supersedes Old O-104 and O-11
Effective 1-1-65

Operator: Conoco Inc.
Address: P.O. Box 460, Hobbs, New Mexico 88240
Reason for requesting (check appropriate box):
☐ Change of corporate name from Continental Oil Company effective July 1, 1979.
☐ Change of ownership
☐ Change of transporter
☐ Change of lease
☐ Change of well
☐ Change of operator
☐ Change of production office

If change of ownership, give name and address of previous owner.

DESCRIPTION OF WELL AND LEASE
 Well Name: MC A Unit B try 2 172 Maljamar GSA
 Section: 0 Township: 1295 Range: South Line: 1345 Corner: East
 Section: 29 Township: 17-S Range: 32-E Line: Lea

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
 Transporter: Texas New Mexico Pipeline
 Address: PO Box 1510, Midland, Texas
Navajo Pipeline
 Address: North Freeman Avenue, Artesia, N.M.
CONOCO INC plant No. 60
 Address: PO Box 2197, Houston, Texas
 Section: D 28 17 32 Yes

If this production is commingled with that from any other lease or pool, give commingling order number:
 COMPLETION DATA
 Type of completion: AI
 Completion date:

TUBING, CASING, AND CEMENTING RECORD
 Tubing: Casing: Cement:

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL
 Test data:
 Request for allowable:

GAS WELL
 Gas well:
 Gas well:

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.
 Division Manager:
 District Supervisor:
 Date: 8-23-79
 Approved:
 Title: District Supervisor
 Date: AUG 24 1979
 This form is to be filed in compliance with RULE 1104.
 If there is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.
 All sections of this form must be filled out completely for all wells on new and recompleted wells.
 Fill out only Sections I, II, III, and IV for changes of ownership, name or number, or transporter or other such change of condition. Separate Forms O-104 must be filed for each pool in multi-completed wells.