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DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

Santa Fe, New Mexico 87504-2088

<u>I.</u>	REC	QUEST FO TO TRA	OR ALLOW	ABLE AND	AUTHOR	RIZATION	ł	•		
Conoco In				0 -025-00800						
Address	کـــــــــــ	.0. \	1 02 ~ 1	, ,	FV 0:-		0 -0	x5-00	0 800	
Reason(s) for Filing (Check proper box)	une,	wes.	+ 020		ther (Please ex	(05				
New Well		Change in	Transporter of:	, A C	Manor	MC*	inly	1 From	\wedge	
Recompletion Change in Operator	Oil Cosinet		Dry Gas	-\ -\ -\	mang Zutter	n # ?	to P	Y Hen	~#2.	
If change of operator give name and address of previous operator	Canada	ead Gas	Condensate						0	
II. DESCRIPTION OF WELL	. AND I	FACE							··· ,	
Lease Name	‡ り		Pool Name, Inc.	uding Formation		Kind	of Lease		Lease No.	
Location (72	123.	Majar	nar (G	5A).	State	, Federal or I	ice C-	0590010	
Unit Letter	<u> </u>	00	Feet From The	north	ne and 19°	<i>80</i> .	eet From The	. Last	Line	
Section 33 Toward	ا ا	S	Range 32		IMPM.		CATION THE	/ ^ -		
					. 7		·	Lea	County	
III. DESIGNATION OF TRAP Name of Authorized-Transporter of Oil	SPUK I	or Condens	L AND NAT	URAL GAS Address (Gi	we address to w	Hich approve		form is to be s	ent)	
Name of Authorized Transporter of Caeix				Draver 159 A			riesa non 88210.			
Conaco Jr Ma	· ·		or Dry Caus [Address (Gi	e address to w			form is to be se	ent)	
If well produces oil or liquids,	Unit		Two Rg		BOX 9 ly consected?	Marie Mo	<u> </u>	My 1V	N 889M	
give location of tanks.	10	128 1	H2139E	3 W			1911) '		
If this production is commingled with that IV. COMPLETION DATA	from any of	her lease or po	ool, give commin	gling order som	ber:				······································	
Designate Type of Completion		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Soudded		l Bandana F		-	<u>i</u>	<u>i</u>				
	Date Com	pl. Ready to F	70d.	Total Depth			P.B.T.D.		-	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations							Depth Casing Shoe			
								-g case-		
HOLE SIZE	CA	CING A TUR	ASING AND	CEMENTI		<u>D</u>				
	HOLE SIZE CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
	<u> </u>									
. TEST DATA AND REQUES	T FOR A	LLOWAE	BLE	<u> </u>		·	<u> </u>			
OIL WELL (Test must be after re Date First New Oil Run To Tank	covery of to	tal volume of	load oil and mus	t be equal to or	exceed top allo	wable for this	depth or be j	for full 24 hour.	z.)	
Sate Line Men Oil Kim 10 150k	Date of Tea			Producing Me	thod (Flow, pur	mp, gas lift, ei	c.)			
ength of Test	Tubing Pressure			Casing Pressur	re .		Choke Size			
ctual Prod. During Test	Oil - Bbls.			Water - Bbla.			Gas- MCF			
GAS WELL Actual Prod. Test - MCF/D	*									
cust Frod. 1est - MCF/D	Length of Test			Bbls. Condensate/MMCF			Gravity of C	Gravity of Condensate		
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressur	Casing Pressure (Shut-in)			Choke Size		
T OPED A TOP CERTIFICA	TE OF			ļ						
I. OPERATOR CERTIFICATION Is hereby certify that the rules and regulate.				O	IL CONS	SERVA	TION			
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				OIL CONSERVATION DIVISION						
is the sint combies to us pest of my kn	owiedge and	Delief.		Date /	Approved					
Marrotte Mel	en)								
Signature Nannette Nelsm		ma in	Annich	By		· ·				
Printed Name Title				Title						
Date		12) 1080	<u>a-6553</u>	iille						

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.