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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

CORRECTED REPORT Form C-104

Supersedes Old C-104 and C-110

FILE	KEGGEOVI	AND	Effective 1-1-65	
u.s.g.s.	AUTHORIZATION TO TRAN	SPORT OIL AND NATURAL G	AS	
LAND OFFICE				
TRANSPORTER OIL				
OPERATOR GAS	·			
PRORATION OFFICE				
Cperator	•			
Conoco Inc.				
	Hobbs, New Mexico 88240			
Reason(s) for filing (Check proper box)		Other (Please explain)		
New We!1	Change in Transporter of:	Change of corpo	rate name from	
Recompletion	Oil Dry Gas Casinghead Gas Condens		Company effective	
Change in Ownership	Casingheda Gus Goillaine	301y 1, 1373.		
If change of ownership give name				
and address of previous owner				
I. DESCRIPTION OF WELL AND	LEASE. Well No. Pool Name, Including For	rmation Kind of Leas	e Lease No.	
Lease Name MCA Unit	23 Maljamar G.	-SA State, Federa	rl or Fee LC-(2)94(15(6)	
Location	23161			
Unit Letter : CC	Feet From TheLine	and 1980 Feet From	The	
0.0	170 3	NOS , NMPM, 3e	County	
Line of Section To	wnship Range			
I DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GAS	S Address (Give address to which appro	and copy of this form is to be senti	
Name of Authorized Transporter of Ci	or Condensate	11 6	-Les - XIM	
Novajo Pipeline	Company Isinghead Gas De or Dry Gas	N. Freeman five. A Address (Give address to which appr	oved copy of this form is to be sent)	
Name or Authorized Transcorter of Ca		Da D. 2107 A	louston, TX	
	Ma Janar Lant No. 60	Is gas actually connected?	hen	
If well produces oil or liquids, give location of tanks.	A 30 17 22	yes	N/A	
	ith that from any other lease or pool,	give commingling order number:		
V. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.	
Designate Type of Completi			1 1	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	· ·	Top Oil/Gas Pay	Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top On/Gds Pdy		
Perforations			Depth Casing Shoe	
Periorditons				
		D CEMENTING RECORD	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	after recovery of total volume of load o epth or be for full 24 hours)	vil and must be equal to or exceed top allow	
OIL WELL	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
Date First New Oil Run To Tanks	Baile 6. 1995			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
		Water - Bbls.	Gas-MCF	
Actual Prod. During Test	Cil-Bbls.			
GAS WELL			Comity of Condensate	
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
		Casing Pressure (Shut-in)	Choke Size	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			
	NOT.	OIL CONSER	VATION COMMISSION	
VI. CERTIFICATE OF COMPLIA	INCE	OCT	. 19	
t hereby certify that the rules ar	nd regulations of the Oil Conservation	APPROVED		
I hereby certify that the rules and regulations of the information given Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Court	BY Will Killen	
		District Supervisor		
		111 / 2 2		
Alle and		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepens the deviation of the deviation of the deviation.		
////Maryeroe		If this is a request for allowante for a newly structured with this form must be accompanied by a tabulation of the deviation will, this form must be accompanied by a tabulation of the deviation will be accompanied with Rule 111.		
Division Manager		tests taken on the well in accordance with the form must be filled out completely for allow		
		II alta on new and recombition	2 MC11	
SEP 21 1979° NMOCD (5) USGS (2) Bartners (19), File		Fill out only Sections	 II. III, and VI for changes of own sporter or other such change of condition 	
NP(OCP (E) 11 5 C (1)	(Base) + ensligh File	Separate Forms C-104	must be filed for each pool in multip	
NMOCD (5) USGS (2)	rar 1205 (17), FILE	Separate Forms C-104		