		**	
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DISTRIBUTION	NEW MEXICO OIL C	ONSERVATION COMMISSION	Form C+104
SANTA FE	····	FOR ALLOWABLE	Supersedes Old C-104 and C-11
FILE	7	AND	Effective 1-1-65
U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL G	SAS
LAND OFFICE			
TRANSPORTER GAS			
OPERATOR	<u>i</u>		
PRORATION OFFICE Cperator	<u> </u>		
Conoco In	C.		
	460, Hobbs, New Mexico 8824		
Reason(s) for filing (Check prope	r box)	Other (Please explain)	
New Weil	Change in Transporter of:	Change of corpo	
Recompletion Change in Cwnership	Oil Dry Ga Castnghead Gas Conden	1 1 1	Company effective
If change of ownership give na and address of previous owner			
II. DESCRIPTION OF WELL A			
Lease Name	well No. Pool Name, including Fe	_ •	
MCA Unit	156 Maljamar G	State, Federa	1 cr Fee LC-0294/0
Location Unit Letter	2580 Feet From The N Lin	e and 2595_Feet From 1	The W
Line of Section 29		37 , NMPM, Le	
II. DESIGNATION OF TRANS	ORTER OF OIL AND NATURAL GA of Oil or Condensate	Acctess (Give address to which approx	A second
Novajo Pipelin	of Casingneed Gas or Dry Gas	N. Freeman Ave. Ar Address (Give address to which appro-	ved copy of this form is to be sent)
V = 1 = + 1 0 1 /		P.D. Box 1206. Ma	MK same ile
if well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	N/A
give location of tanks.		· · · · · · · · · · · · · · · · · · ·	74//
If this production is commingle V. COMPLETION DATA	ed with that from any other lease or pool,	give commingling order number:	
	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.
Designate Type of Comp	oletion - (A)	1 1 !	1 1
Date Spudded	Date Compi. Ready to Prod.	Total Depth	P.B.T.D.
		Top Cil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, e	tc., Name of Producing Formation	Top Ch/Gds Pdy	
Perforations			Depth Casing Shoe
		CENENTING BECORD	
		D CEMENTING RECORD DEPTH SET	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	3,0.00 02,000
V. TEST DATA AND REQUES	TFOR ALLOWABLE (Test must be a able for this de	epth or be for full 24 hours)	and must be equal to or exceed top allow
Date First New Cil Run To Tank	s Date of Test	Producing Method (Flow, pump, gas li	ft, etc.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	O11 • 3bla.	Water - Bbls.	Gas - MCF
GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	TANGE.	OII CONSERVA	ATION COMMISSION
VI. CERTIFICATE OF COMPI	HANCE	1111 5	197 9
I hereby certify that the rules	and regulations of the Oil Conservation	APPROVED	, 19
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Care Styling	
		Distuist Communicion	
A. 1			
415/	114 1 11111		compliance with RULE 1104.
_/////los	masse	If this is a request for allowell, this form must be accompa	wable for a newly drilled or deepened anied by a tabulation of the deviation
(Fignature)		tests taken on the well in acco	rdance with RULE 111.

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 nieted wells.

Division Manager

NMOCD (5)

(Date)

LISAS(S) PARTNERS

FILE

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JUN 1 5 1979

OIL CONSERVATION COMM.

HOBBS, N. M.