NO. OF COPIES RECE	[Y E D	:	
DISTRIBUTION			•
SANTA FE			
FILE			i
u.s.g.s.			<u> </u>
LAND OFFICE			
TRANSPORTER	OIL	1	
	GAS	i	

NMOCD (5) USGS (2) PARTHERS

1	DISTRIBUTION		ONSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110		
	SANTA FE	REGUESI	FOR ALLOWABLE	Effective 1-1-65		
	FILE	AUTHORIZATION TO TRA	AND	CAS		
	U.S.G.S.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL	GAS		
	OIL					
	TRANSPORTER GAS					
	OPERATOR					
	PRORATION OFFICE					
1.	Cperator					
	Conoco Inc.					
P.O. Box 460, Hobbs, New Mexico 88240						
	New Well	Change in Transporter of:	Change of corp	porate name from		
	Recompletion	Oil Dry Ga		1 Company effective		
	Change in Ownership	Casinghead Gas Conder	f 1	, , , , , , , , , , , , , , , , , , , ,		
	If change of ownership give name					
	and address of previous owner					
11	DESCRIPTION OF WELL AND	LEASE				
•••	Lease Name Well No. Pool Name, including Formation Kind of Lease					
	MCA Unit Ship 3	225 Maljamar 6	1-SA State, Fed	eral or Fee		
	Location					
	Interest D : 2	5 Feet From The Lir	ne and 25 Feet Fro	m The		
	Unit Letter;;					
	Line of Section 34 Tow	enship 175 Range	32 E , NMPM, L	ea County		
ш.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS			
	Name of Authorized Transporter of Cil	or Condensate	Address (Give address to which app	proved copy of this form is to be sent)		
	Texas-New Mexic		Midland Texas			
	Name of Authorized Transporter of Cas		•	proved copy of this form is to be sent)		
	Continental Oil Co. 6	Fasoline Plant No. 60	P.O. Box 1206, Ma	aliamar NM		
	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected?	when		
	give location of tanks.	C 27 175 32E	yes	N/A		
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA		New Well Workover Deepen	Plug Back Same Resty. Diff. Resty.		
	Designate Type of Completion	Oil Well Gas Well	New Melt , Motkover , Deebeu	Plug Back Same Nes 1. Sim Nes 1.		
	Designate Type of Completion		1	P.B.T.D.		
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B. 1.D.		
				Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cil/Gas Pay	Tabling Depti.		
			<u> </u>	Depth Casing Shoe		
Perforations .						
		THRING CASING AN	D CEMENTING RECORD			
			DEPTH SET	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	DEFTRISE			
			-formation of total maluma of land	oil and must be equal to or exceed too allows		
V.	EST DATA AND REQUEST FOR ALLOWABLE (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)					
	OIL WELL Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	s lift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Length of Teat					
	Actual Prod. During Test	Cil-Bbls.	Water - Bbls.	Gas-MCF		
	Actual Floar Dailing 1991					
	1					
	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		
				<u> </u>		
3/1	CERTIFICATE OF COMPLIAN	CF	OIL CONSER	VATION COMMISSION		
¥1	CERTIFICATE OF COMPLIANCE		JUL	9 19 702		
	I hasabu passifu shas sha sulan sulan	regulations of the Oil Consequation		, 19		
	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.			(Lever Motion		
			BY	BY		
			District Su	TITLE District Supervisor		
	(A)			 -		
	Allia		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened			
	- (////now	were	Il the form must be accor	mnanied by a tabulation of the Geviation		
	C V = (Fren	ature)	theste 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 completed wells.

RECEIVED

JUN 1 5 1979
OIL CONSERVATION COMM.