HO. OF COPIES RECEIVED DISTRIBUTION

NMOCD (5) USGS (2), Profiners (19), File

NEW MEXICO OIL CONSERVATION COMMISSION

	SANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65
-	FILE		AND	
}	U.S.G.S.	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS		AS
ł	OIL			
	TRANSPORTER GAS			
	OPERATOR			
1.	PRORATION OFFICE Cperator			
	Conoco Inc.			
	P.O. Box 460, Hobbs, New Mexico 88240			
	Reason(s) for filing (Check proper box) New Well Change in Transporter of: Change of corporate name from			
	Recompletion Oil Dry Gas Continental Oil Company effective			
	Change in Cwnership Casinghead Gas Condensate July 1, 1979.			
	If change of ownership give name			
	If change of ownership give name and address of previous owner			
	ESCRIPTION OF WELL AND LEASE			
11.	Lease Name .	Well No. Pool Name, Including For	rmation Kind of Lease	Lease No.
	MCA Unit (Blu 3	346 Maljamar G	-SA State, Federa	Ler Feel C-C57210
	Location M 5	5	and 1200 Feet From 5	_ (.)
	Unit Letter ;	Feet From TheLine	and 7200 Feet From	The
	Line of Section 27 Township 17-5 Range 32-E, NMPM, Jog Co			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
ш.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which appro-	ved copy of this form is to be sent)
Texas-New Mexico Midland Texas				
	Name of Authorized Transporter of Cas	20	Address (Give address to which appro-	tea copy of this form is to be sent)
	CONOCO LACTA	Unit Sec. Twp. Pge.	Is gas actually connected? Who	er,
	If well produces oil or liquids, give location of tanks.	C 27 17 32	yes	NIA
On non-				
				Plug Back Same Resty. Diff. Resty.
	Designate Type of Completic	<u></u>	l I	P.B.T.D.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.1.D.
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
				Depth Casing Shoe
	Perforations			
		TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
				<u>i</u>
\mathbf{V}	TEST 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 l	ift, etc.)
				Choke Size
	Length of Test	Tubing Pressure	Casing Pressure	Child Size
	Actual Prod. During Test	Oil-Bhis.	Water-Bbls.	Gas - MCF
	CAC HELL			
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
			Chut-(n)	Choke Size
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke 3124
1/1	CERTIFICATE OF COMPLIAN	CE	OIL CONSERY	ATION COMMISSION
٧ı	CENTIFICATE OF COMMENSOR		00123 5/3	
	I hereby certify that the rules and regulations of the Oil Conservation		APPROVED OCT 23 979	
	Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BY Com Alphon	
	Miles Manager		TITLE District Supervisor This form is to be filed in compliance with RULE 1104. 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 completed wells.

RECEIVED

OCT - 1979

O.C.D. HOBBS, OFFICE