		C DRRECTED REPORT		
NO. OF COPIES RECEIVED	→			
DISTRIBUTION	NEW MEXICO OIL	NEW MEXICO OIL CONSERVATION COMMISSION		
SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-110 Effective 1-1-65	
FILE		AND		
U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL (SAS	
LAND OFFICE				
TRANSPORTER OIL GAS				
OPERATOR				
	_			
PRORATION OFFICE				
Conoco Inc.	 			
P.O. Box 46	0, Hobbs, New Mexico 882	40	;	
Reason(s) for filing (Check proper b.		Otner (Please explain)		
New Well	Change in Transporter of:	_ Change of corpo	rate name from	
Recompletion	Oil Dry G		Company effective	
Change in Cwnership	Castnahead Gas Conde		company effective	
		July 1, 1979.		
If change of ownership give name and address of previous owner				
I. DESCRIPTION OF WELL AND				
MCA Unit Othi V	349 Maljamar	Formation Kind of Leas State, Federa	10000001	
Legation	21.10 Jawar C	,	ΔC () 0E 10 (8)	
Unit Letter;	75 Feet From The S	ne and 195 Feet From	The U	
Line of Section 3	Township 17-5 Range	32-E , NMPM, Je	a County	
	RTER OF OIL AND NATURAL G			
Name of Authorized Transporter of (Cil 🔀 cr Condensate 🗍	Address (Give address to which appro	ved copy of this form is to be sent)	
Novaio Pipeline	Company	N. treeman Ave. Ar	tesia NM	
Name or Authorized Transporter of	Casingnead Gas or I ry Gas	Address (Give address to which appro	ved copy of this form is to be sent;	
CONOGO Inc	Maljanar Pant No 60	P.D. Box 2197, H	ouston, TX	
If well produces oil or liquids,	Unit Sec. Twp. Age.	is gas actually connected? Wh		
give location of tanks.	A 26 17 32	ves	NIA	
If this production is commingled	with that from any other lease or pool	give commingling order number:		
V. COMPLETION DATA				
Designate Type of Comple	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Restr. Diff. Restv.	
Designate Type of Comple		1	: : : : : : : : : : : : : : : : : : :	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.	, Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
	TUBING, CASING, AN	ID CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	<u> </u>			
		.1	·	
V. TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be		and must be equal to or exceed top allow-	
OIL WELL	able for this c	lepth or be for full 24 hours)		
Date First New CLI Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l.	ift, etc.)	
Length of Test	Tuping Pressure	Casing Pressure	Chese Size	
			·	
Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	Gas-MCF	
			<u> </u>	
	· 			
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>			<u> </u>	
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERV	ATION COMMISSION	
•			11.30	
I hereby certify that the rules ar	nd 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.			line.	
20010 13 tide and complete to	The state of the series			
		THILE District Supe	ervisor	
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Division Manager

SEP 21 1979 NMOCD (5) USGS (2) Partners (19), File

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.