Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II P.O. Drawer D.D., Astesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 REQUEST FOR ALLOWARI F AND ALITHORIZATION

I.		TO TRAI	NSPORT O	IL AND NA	AUTHOR ATURAL G	IIZA I ION BAS				
CONOCO INC	***				Wei	API No.				
Address							0-025-2	4895		
10 Desta Drive St	e 100W.	Midlan	d. TX 79	705						
Reason(s) for Filing (Check proper box) New Well		Change in T		_	est (Please exp	•				
Recompletion	Oii		ransporter of:	TO AUD	CORRECT IT FOR T	C-104 T RANSPOR	O MATCH	ONC THE	JARD	
Change in Operator	Casinghee		Condensate [THE INT	JIUMITO	X •	
If change of operator give name and address of previous operator										
IL DESCRIPTION OF WELL	AND LEA	SE								
Lesse Name MONSANTO STATE		4 1	ool Name, Includ	-			of Lease		Lesse No.	
Location		<u> </u>	<u>ownsend ma</u>	ORROW (G	AS) (864	00)	Federal or Fe	K-59) 53	
Unit LetterK	1980	F	est From The SC	OUTH Lie	19	80	set From The	WEST	Line	
Section 14 Townshi	16	C C	0.5	D	7.17					
Section Townshi	, 10	<u> </u>	35 JO	, N	MPM, LIE	<u> </u>			County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS										
Name of Authorized Transporter of Oil XX or Condensate PHILLIPS PETROLEUM XX Trucks 4001 PENBROOK, ODESSA, TX, 79760										
Name of Authorized Transporter of Casing	Address (Give address to which approved capy of the				iorm is to be s	ent)				
J.L. DAVIS If well produces oil or tiquide.	<u> </u>		211 N. COLORADO, MIDLA			AND, TX 79701				
give location of tenks.			wp. Res. 6S (35E	is gas actually YES	y connected?	Whee	17			
If this production is commingled with that from any other lease or pool, give commingling order number:										
IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	D.	Mara Bank	Same Res'v	hier hi	
Designate Type of Completion	- (X)			1444 H41	WOLLDWEI	Deepea	Land beck	 Pember Ket A	Diff Res'v	
Date Spudded	Date Compi.	Ready to Pr	od.	Total Depth			P.B.T.D.	•		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing I			etica	Top Oil/Gas Pay			Tubing Depth			
Perforations										
				Depth Casin	& 2pos					
TUBING, CASING AND CEMENTING RECORD										
HOLE SIZE	CAS	NG & TUBI	NG SIZE	DEPTH SET			SACKS CEMENT			
								 -	<u>,=, .</u>	
V. TEST DATA AND REQUES	T FOR AL	LOWAB	LE		····		<u> </u>			
OIL WELL (Test meet be after re								or full 24 hou	rs.)	
Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, get lift, etc.)										
Length of Test	Tubing Press			Casing Pressur	R3		Choke Size			
Acres Bred During Ton				507 . 504			Gas- MCF			
Actual Prod. During Test Oil - Bbis.				Water - Bbis.						
GAS WELL	· · · · · · · · · · · · · · · · · · ·				·		<u> </u>		· · · · · · · · · · · · · · · · · · ·	
Actual Prod. Test - MCF/D	Length of Test			Bble, Condensets/MMCF			Gravity of Condensate			
esting Method (pilot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choka Size			
manag manana (pana, mana pr.)	, word rives	(3245-E)		C212 11	• (000-0)					
VL OPERATOR CERTIFICA	TE OF	OMPLI	ANCE		di OON	CEDVA	TION	N. ((C)C		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.				Date Approved DEC 1 6 1993						
Date Apployed										
SIZE BILL R. KEATHLY SR. REGULATORY SPEC.					By ORIGINAL SIGNED BY JERRY SEXTON					
Printed Name Tale						DIST	RICT I SUP	ERVISOR		
12-13-93	915-6	86-5424	[Title_						
Date		Telepho	No.							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

