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| | GAS |
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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

I. Operator
Conoco Inc.
Address
P.O. Box 460 Hobbs, NM 88240
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------|--|--|---------------------------|
| Lease Name Wm. Mitchell B | Well No. 20 | Pool Name, including Formation Maljamar Grayburg-SA | Kind of Lease State, Federal or Fee | Lease No. LC-029405(b) |
| Location Unit Letter O ; 710 Feet From The S Line and 2180 Feet From The E Line of Section 18 Township 17-S Range 32-E , NMPM, Lea County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---|---|------------|------------|------------|-----------------------------------|-----------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Pipeline | Address (Give address to which approved copy of this form is to be sent) Drawer 159, Artesia, NM 88210 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco Inc. | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1206, Maljamar, NM | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit L | Sec. 17 | Twp. 17 | Pge. 32 | Is gas actually connected? Yes | When 4-01-81 |

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

| | | | | | | | | |
|---|--|----------|--|----------|----------------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 2-03-81 | Date Compl. Ready to Prod. 3-06-81 | | Total Depth 4200' | | P.B.T.D. 4160' | | | |
| Elevations (DF, RKB, RT, GR, etc.) GR 3969' | Name of Producing Formation Grayburg-San Andres | | Top Oil/Gas Pay 3534' | | Tubing Depth 3612' | | | |
| Perforations 4048' - 4028', 3700' - 3921', 3534' - 3606' | | | | | Depth Casing Shoe 4200' | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17-1/2" | 13-3/8" | | 693' | | 625 | | | |
| 7-7/8" | 5-1/2" | | 4200' | | 2360 | | | |
| | 2-7/8" | | 3612' | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (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)

| | | | |
|--|-------------------------|---|--------------------|
| Date First New Oil Run To Tanks 2-25-81 | Date of Test 4-16-81 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24.0 | Tubing Pressure 45 | Casing Pressure NA | Choke Size Open |
| Actual Prod. During Test 212 | Oil-Bbls. 203 | Water-Bbls. 9 | Gas-MCF 45 |

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 |

VI. CERTIFICATE OF COMPLIANCE

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.

Jane A. Heir
(Signature)
Administrative Supervisor

4-22-81

(Title)

(Date)

NMDCD-5
USGS-2

File-1

OIL CONSERVATION COMMISSION

APPROVED 4-22-81
BY [Signature]
TITLE SUPERVISOR DISTRICT 3

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.

