

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

Operator
Conoco Inc.Address
P. O. Box 460, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name State H-35	Well No. 15	Pool Name, including Formation Vacuum Grayburg SA	Kind of Lease State, Federal or Fee B-3196	Lease No.
Location				
Unit Letter C ; 1295 Feet From The North Line and 2615 Feet From The West				
Line of Section 35 Township 17S Range 34E, NMPM, Lea County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Mobil Oil Company	P. O. Box 633, Midland, TX 79702	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Co. GPM Gas Corporation	EFFECTIVE: February 1, 1992 4001 Penbrook, Odessa, TX 79762	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 35
	Twp. 17	Rge. 35
	Is gas actually connected? Yes	
	When 3-21-83	

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Some Res'tv. <input type="checkbox"/>	Diff. Fr. <input type="checkbox"/>
Date Spudded 1-31-83	Date Compl. Ready to Prod. 3-19-83		Total Depth 4800'		P.B.T.D. 4768'			
Elevations (DF, RKB, RT, GR, etc.) 4005 GR	Name of Producing Formation Grayburg SA		Top Oil/Gas Pay 4350'		Tubing Depth 4755'			
Perforations 4352' - 4487' 4560' - 4564', 4700' - 4755'					Depth Casing Shoe 4800'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	350'	287 sx
12-1/4"	9-5/8"	1575'	423 sx
7-7/8"	5-1/2"	4800'	1446 sx
	2-3/8"	4755'	

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 3-19-83	Date of Test 3-25-83	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test 30	Oil-Bbls. 7	Water-Bbls. 23	Gas-MCF 28

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

David L. Lynn
(Signature)
Administrative Supervisor
(Title)
June 2, 1983
(Date)

OIL CONSERVATION DIVISION

JUN 6 1983

APPROVED _____, 19____

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

TITLE _____

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 deviated tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

CONOCO INC.

P. O. Box 460
Hobbs, New Mexico

New Mexico Oil Conservation Division
P. O. Box 1980
Hobbs, New Mexico 88240

Gentlemen:

In compliance with New Mexico Oil Conservation Division
Rule III, we are submitting below a list of deviation surveys taken
on Conoco Inc. State H-35 No. 15,
located Unit C Section 35, Township 17S, Range 34E,
Lea County, New Mexico.

<u>DEPTH</u>	<u>DEGREE</u>	<u>DEPTH</u>	<u>DEGREE</u>	<u>DEPTH</u>	<u>DEGREE</u>
<u>350'</u>	<u>1/2°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>694'</u>	<u>1°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>1198'</u>	<u>1/2°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>1541'</u>	<u>1°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>2065'</u>	<u>1-1/2°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>2795'</u>	<u>2-1/2°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>2899'</u>	<u>2-1/2°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>3150'</u>	<u>2-1/4°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>3644'</u>	<u>1-3/4°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>3870'</u>	<u>2°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>4800'</u>	<u>2°</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

Yours very truly,

David L. Luger

Subscribed and sworn to before me, a Notary Public, in and for Lea County,
New Mexico, this 2nd day of June, 19 83.

24/11/84
My Commission Expires

Cecil O. Gaudin
Notary Public