

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-1-78

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LEASE OFFICE	
TRANSPORTER	
OPERATION	
PRODUCTION OFFICE	
OPERATOR	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Conoco Inc.

Address

P. O. Box 460, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

Approval to flare casinghead gas from
this well must be obtained from the
BUREAU OF LAND MANAGEMENT (BLM)Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease					
Buffalo Federal	1	East Shugart Delaware	State, Federal or Fee NM-9017						
Location	Unit Letter	L	1650	Feet From The	South	Line and	330	Feet From The	West
Line of Section	18	T. Township	18S	Range	32E	N.M.P.M.	Lea	Cour.	

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)					
Conoco Inc. Surface Transportation	P. O. Box 2587, Hobbs, New Mexico 88240					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Is well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	Where
	L	18	18S	32E	No	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Reservoir	Dist. P.
	X		X					
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
9-9-87	10-8-87	6519'	6469'					
Perforations (DF, RAB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
3734' Gr.	Delaware	4595'	6373'					
Perforations	Depth Casing Shoe							
4595' - 4870', 6279' - 6329'	6519'							

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	950'	570 Sx.
7-3/8"	5-1/2"	6519'	2775 Sx.
	2-3/8"	6373'	

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
able for this depth or be for full 24 hours)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
10-16-87	11-24-87	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24			
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
114	33	81	TSTM

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-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.D. F. Finney
(Signature)
Administrative/Supervisor

December 8, 1987

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 10 1987, 19BY 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 deep
well, this form must be accompanied by a tabulation of the devi-
teats taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for a
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of
well name or number, or transporter, or other such change of condi-

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INCLINATION REPORT

OPERATOR: Conoco Inc.

ADDRESS: P. O. Box 460
Hobbs, NM 88240

LEASE NAME: Buffalo Federal WELL#: 1

FIELD: _____

LOCATION: Lea County, New Mexico

1650' FSL & 330' FWL, Sec. 18, T-18S, R-32E

Measured Depth	Angle of Inc.	Displacement Per 100 ft.	Accumulative Displacement
450 *	0.50	0.87 *	3.9150
572 *	0.25	0.44 *	4.4518
950 *	1.25	2.18 *	12.6922
1394 *	1.00	1.75 *	20.4622
1839 *	1.25	2.18 *	30.1632
2275 *	1.00	1.75 *	37.7932
2928 *	0.75	1.31 *	46.3475
3265 *	1.00	1.75 *	52.2450
3527 *	1.00	1.75 *	56.8300
3985 *	1.00	1.75 *	64.8450
4372 *	0.75	1.31 *	69.9147
4820 *	1.00	1.75 *	77.7547
5174 *	1.75	3.05 *	88.5517
5547 *	1.50	2.62 *	98.3243
5985 *	1.00	1.75 *	105.9893
6273 *	0.50	0.87 *	108.4949
6500 *	0.50	0.87 *	110.4698

I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.

CACTUS DRILLING COMPANY

Rebecca Edwards

TITLE: DRILLING SECRETARY

AFFIDAVIT:

Before me, the undersigned authority, appeared Rebecca Edwards known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that she is acting for and in behalf of the Operator of the well identified above, and that to the best of her knowledge and belief such well was not intentionally deviated from the true vertical whatsoever.

Rose Mc Collaum
AFFIANT'S SIGNATURE

Sworn and subscribed to in my presence on this 20 day of October, 1981.

Lana Lewis
Notary Public in and for
the County of Midland,
State of Texas.

SEAL

My Commission Expires: 7-17-89

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