OF COPIES RECEIVED		ERVATION COMMISSION	Form C-104 Supersedes Did C-104 and C-11	
DISTRIBUTION	REQUEST FOR	ALL CHABLE	Effective 1-1-92	
	AN	PORT OIL AND NATURAL GAS		
	AUTHORIZATION TO TRANSP	ORT OIL AND HATOM =		
0.3.				
OOFFICE				
NSPORTER GAS				
HATOR				
ORATION OFFICE				
qtot				
Conoco Inc.	Now Marico 88240			
P.O. Box 460, 110	bbs, new nextee	Other (Please explain) Change of corporate	name from	
sonis) for tiling (Check proper box)	Change in Transporter of:	Continental Oil Com	pany effective	
w #e!l	Cil Dry Gas	Continental off con		
completion	Casinghead Gas Condensat	te July 1, 1979.		
inge in Cwnership	4stedient Gar			
hange of ownership give name address of previous owner			[eqse]io.	
SCRIPTION OF WELL AND LE.	ASE nest No. Poor Name, Including For	mutton Kind of Cease State, Federal or	0 2151	
SCRIPTION STATE	Eumont Qu	seen Gas Signe received		
State A3 6 Com	- ESTACE CONT.	_	E	
oration .		and 660 Feet From The		
1 1900	Feet From The	dng	County	
Unit Letter:		37-F, NMPM, Led		
J Towns	hip 20-3 Hange C			
Line of Section	CA	\$	and of this form is to be sent)	
ESIGNATION OF TRANSPORTE	R OF OIL AND NATURAL GA.	S Andress (Give address to which approve	a copy of this 7.	
Name of Authorized Transporter of Cil	or Condensate			
		Address (Give address to which approve	a copy of this formers	
Name of Authorized Transporter of Casin	gneda Gas or Ory Gas	10 15011 WINE	w Mexico	
		Is gas actually connected? When		
1430 Maiaret	Unit Sec. Twp. Rge.	Is gas decidant		
Lea Haurds.	1 1			
If well produces on or regard, give location of tanks. If this production is commingled with	other lease or pool.	give commingling order number:	Diff Besty	
of this production is commingled with	that from any other	Workeyer Deepen	Plug Back Same Resty, Diff, Resty	
COMPLETION DATA	- OII Werr	New West	1	
Designate Type of Completion	n = (X)		P.B.T.D.	
Designate Type of Comp	Date Compi. Ready to Prod.	Total Depth		
Date Spudded	Date Compared		Tubing Depth	
	Name of Producing Formation	Top Oil/Gas Pay		
Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formatte		Depth Casing Shoe	
Elevations (B)			Depth Castrid	
Perforations		ND CEMENTING RECORD	SACKS CEMENT	
	TUBING, CASING, A	DEPTH SET	SACKS CEMENT	
	CASING & TUBING SIZE			
HOLE SIZE				
	-			
			in the caval to ar exceed top al	
		oe after recovery of total volume of load o	t and must be expected.	
V. TEST DATA AND REQUEST I	FOR ALLOWABLE (Test must be able for this	s depth or be for full 24 hours)	life, esc.)	
	2000 / 1	Producing Method (Flow, pump, gas	····	
Oll. WELL Date First New Oil Run To Tanks	Date of Test		Choke Size	
Date rust New On 1150		Casing Pressure	Cuore Dive	
	Tubing Pressure			
Length of Test		Water - Bbis.	Gas-MCF	
	011-35.6.	Marer - Dave.		
Actual Prod. During Test				
			Gravity of Condensate	
GAS WELL	· Tar	Bbls. Condensate/MMCF		
Actual Prod. Test-MCF/D	Length of Test		Choke Size	
Actual 1	[2000 (2)]	Casing Pressure (Shut-in)		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	1		
Testing Method (phot, off		OIL CONSER	RVATION COMMISSION	
	ANCE	· · · · · · · · · · · · · · · · · · ·	10070 /2 ·n	
VI. CERTIFICATE OF COMPLI	ANCE		120 2019 . 19	
	OIL CARREN	APPROVED	Liston	
t beachy certify that the rules a	and regulations of the Oil Conserve ed with and that the information of the best of my knowledge and be	given		
Commission have been compli	ed with and that the information of the best of my knowledge and be	elief. BY	Supervisor	
above is true and complete to	· (pe ===================================	TITLE District		
		11 11 0	Honce with RULE 1104.	

MMOCD (5) 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.