í	wg. of coe.ES #ECEIVED				
i	OISTRIBUTION		00055704171044 50444404	_	
-	SANTA FE	NEW MEXICO CIL CONSERVATION COMMISS REQUEST FOR ALLOWABLE		Form C-104 Superseaes Oli C-104 and C-11	
	FILE	, KEGOEST	AND	Effective 1-,-55	
	u.s.5.s.	AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL G	AS	
	LAND OFFICE				
	TRANSPORTER OIL				
	I GAS :				
	OPERATOR	•			
1.	PRORATION OFFICE	:			
	Conoco Inc.				
	Aparess				
	P.O. Box 460,	Hobbs, New Mexico 8824	40		
	Reasonist for tiling (Check proper box)		Other (Please explain)		
	New Well	Change in Transporter of:	Change of corpora		
	Recompletion	Oil Dry Ga	: i l	Company effective	
	Change in Cwnership	Castrighead Gas Conder	July 1, 1979.		
	If change of ownership give name and address of previous owner				
11.	DESCRIPTION OF WELL AND	LEASE			
	Lease Name Real No. Section Relating Formation Kind of Lease Lease No.				
	State KN-12 3 Eumout Vates TRuis Queen State, Federal or Fee B-10233				
	Location				
	Unit Letter 5 ; 1711 Feet From The S Line and 1677 Feet From The E				
	Line of Section 12 Township 198 Range $36E$, NMPM, Let County				
	Line of Section 12 Tow	mship //5 Hange	SGE , NMPM, C	ea County	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS Andress (Give address to which approv	red copy of this form is to be sent;	
	(outinental Oil Surface Transportation Hobbs, NM				
	Name of Authorized Transporter of Casingness Gas of Dry Gas Address (Give address to which approved copy of this form is to be sent)				
	EL Paso, TX				
	If well produces oil or liquids,	Unit Sec. Twp. Pge.	Is gas actually connected? Whe		
	give location of tanks.	N 12 19 36	yes	8-15-78	
		h that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA Cli Well Gas Well New Weil Workover Deepen Plug Back Same Resty, Diff, Resty,				
	Designate Type of Completic	on = (X)		1	
	Date Spucaed	Date Cample Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, e.c.,	Name of Froducing Formation	Top Oil/Gas Pay	Tubing Depth	
				Depth Casing Shoe	
	Periorations			Bepin Guaniq and	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
				<u> </u>	
		<u> </u>			
	TEST DATA AND REQUEST FOR ALLOWABLE (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)				
	OIL WELL Date First New Oil Run To Tanks	(Date of Test	Producing Method (Flow, pump, gas lij	(t, esc.)	
	2 2.0 1 1.22 1.23 2.1 1.23 1.23 1.23 1.23 1.2				
-	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prog. During Test	CII-Bbis.	Water-Bbls.	Gas-MCF	
	CASWELL				
	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	
			11		
VI.	CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
			APPROVED		
	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.		APPROVED TOTAL X 1/A FOR		
			BY		
			TITLE District Supervisor		
	(1 Trast	Section 1	This form is to be filed in compliance with RULE 1104.		
	VI-11/11.		The second is to be three in the		

(Signature) Division Manager

(Title)

(Date)

MMOCD (5) FILE

APPROVED JUN 26 1979 . 19
By Jerry Sisten
TITLE District Supervisor

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.

RECEIVED

JUN221979
OIL COMSERVATION COMM.
HOBBS. N. M.