

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Conoco Inc.	Well API No. 30-025-30946
Address 10 Desta Drive West, Ste 100W, Midland, Texas 79705-4500	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> 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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name State A-2A	Well No. 6	Pool Name, Including Formation Skaggs Drinkard	Kind of Lease State, Federal or Fee	Lease No. B-2656
Location Unit Letter 0 : 330 Feet From The South Line and 1650 Feet From The East Line Section 2 Township 20S Range 37E, 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"/> Conoco Surface Transportation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2587, Hobbs, New Mexico 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 2	Twp. 20	Rge. 37	Is gas actually connected? Yes	When? 02/14/91

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 12/09/90	Date Compl. Ready to Prod. 02/14/91		Total Depth 7050		P.B.T.D. 6972			
Elevations (DF, RKB, RT, GR, etc.) GL 3597/3615 KB	Name of Producing Formation Drinkard		Top Oil/Gas Pay 6667		Tubing Depth 6646			
Perforations 6770-6972					Depth Casing Shoe 6972			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2	13-3/8" 2-7/8"		1443		1200 SxS			
7-7/8	7" 2-7/8"		6972		2520 SxS			

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 Tank 02/14/91	Date of Test 02/15/91	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24	Tubing Pressure N/A	Casing Pressure N/A	Choke Size N/A
Actual Prod. During Test 304	Oil - Bbls. 184	Water - Bbls. 120	Gas- MCF 200

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

VI. OPERATOR 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.

Signature
Nannette Nelson Oil Prod. Analyst
Printed Name
02/15/91 (915)686-6553
Date Telephone No.

OIL CONSERVATION DIVISION

FEB 19 1991

Date Approved

By

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.