40, OF COPIES ACCEIVED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMI. Form C -104 SANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-1 Effective 1-1-65 FILE AND U.S.G.S AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER GAS OPERATOR PRORATION OFFICE Cperator Conoco Inc. P.O. Box 460, Hobbs, New Mexico 83240 Reason(s) for tiling (Check proper box) Other (Please explain) Hew Well Change in Transporter of: Change of corporate name from Recompletion OH Dry Gas Continental Oil Company effective Change in Ownership Casinghead Gas Condensate July 1, 1979. If change of ownership give name and address of previous owner ____ DESCRIPTION OF WELL AND LEASE Pool Name, Including Formation Kind of Lease Britt Eunice-Monument State, Federal or Fee 1980 Feet From <u>53</u>0 Feet From The Range Lea NMPM. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS ive addr ss to which approved copy of this form is to be sent! Atlantic Rich Field lidland (0 exa; Name of Authorized T or Dry hich approved copy of this form is to be sent) P.ge. Unit If well produces oil or liquids, give location of tanks. Is gas actually connected? When If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Gas Well Workover Deepen Plug Bock Some Resty, Diff. Resty Designate Type of Completion -(X)Date Compl. Ready to Prod. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc., Name of Froducing Formation Top Oll/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 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) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test Casing Pressure Tubing Pressure Choke Size Actual Prod. Duting Test Oil-Bbls. Water - Bble. Gas - MCF GAS WELL 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 I. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPRO 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. BY Supervisor TITLE. District This form is to be filed in compliance with RULE 1104. Res

(Signature)

NMOCD (5)

USGS(2)

Division Manager

NMFO(4) FILE

If this is a request for allowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

Lease No.

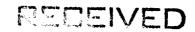
LC-031621 (6)

County

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 multiple completed wells.



JUN 1 2 1979
CIL COMSERVATION COMM.
NODES, N. M.