Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

4.		10 1117	1140	OITI OIL	- און טווא	TURAL G						
Operator Conoco Inc.	Conoco Inc.								Well API No. 30-025-06806			
Address 10 Desta Drive STE 100 W, Midland, TX 79705								JU-UZD-UBUb				
						ee (Di	-i\					
Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of:												
Recompletion XX	Oil		Dry (- —								
Change in Operator	Casinghea	ıd Gas 🗍	_	lensate								
If change of operator give name and address of previous operator Cancel Drinkard												
II. DESCRIPTION OF WELL												
LOCKHART A-27	Well No. Pool Name, Including PADDOCK					ing Formation			ì	ease No. 032096A		
Location C 660 Unit Letter Feet From The NORTH Line and 1650 Feet From The WEST Line												
27	- :2	1 S		3	7 R	7	LEA	eet From The	MEST	Line		
Section Township	·		Rang	ge	, N	MPM,		·		County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil XX or Condensate Address (Give address to which approved copy of this form is to be sent)												
TEXAS-NEW MEXICO PIPELINE						P.O. BOX 2528, HOBBS, NM 88240						
Name of Authorized Transporter of Casinghead Gas TEXACOAPRODUCTING INC					Address (Giv	BOX 3000	hich approved), TULSA	copy of this form is to be sent) , OKLA. 74102				
If well produces oil or liquids, give location of tanks.	Unit B	Sec. Twy 27 21		37E Rge.	Is gas actually connected? YES		When	? 9–10–91				
If this production is commingled with that f	rom any oth	ner lease or	pooi, g	give comming!	ing order num	ber:						
IV. COMPLETION DATA		louw.n		C 11/-11	1 57 97.0			1				
Designate Type of Completion -	· (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back XX	Same Res'v	Diff Res'v		
		npl. Ready to Prod. 6-91			Total Depth			P.B.T.D. 6430				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation PADDOCK				Top Oil/Gas Pay 5239			Tubing Depth 5007				
Perforations 5239-45, 5249-51, 5258-70								Depth Casing Shoe				
3233-43, 3243-31, 323			<u> </u>									
TUBING, CASING AND					CEMENTI		D					
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT				
	SAME AS				BEFORE			 				
U TEST DATA AND DECLIES	T EOD A		A DI 1	5								
V. TEST DATA AND REQUES OIL WELL (Test must be after re					he emist to on	avered top all:	anabla fan shi	a dameh an ba e		\		
Date First New Oil Run To Tank	Date of Te		oj rodi	I OH WHE MUST		thod (Flow, pu			or just 24 nous	3.)		
4-10-92					FLOWING							
Length of Test	Tubing Pressure				Casing Pressure			Choke Size				
Actual Prod. During Test	Prod. During Test Oil - Bbls.				Water - Bbls.	<u> </u>		Gas- MCF				
CAS WELL					28			360				
GAS WELL Actual Prod. Test - MCF/D Length of Test					Bbis. Condensate/MMCF			Gravity of Condensate				
								•				
Testing Method (pitot, back pr.)	k pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size				
VI. OPERATOR CERTIFICA	ATE OF	COMP	LIA	NCE		···						
I hereby certify that the rules and regulations of the Oil Conservation					(OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date ApprovedJUN 0 5 '92							
Bie R. Douilly												
Signatur BILL R. KEATHLY, SR. REGULATORY SPEC.					By_	By Orig. Signed by. Paul Kautz						
Printed Name Title					Title	, <u>G</u> e	ologist	. •				
6-1-92 Date	915	5 <u>-686-5</u> Tele	424 phone		Tide							
					·							

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.

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