Submit 5 Copius Appropriate District Office <u>DISTRICT 1</u> P.O. Box 1980, Hobbs, NM 88240	E	nergy, Mineral		New Mexico Itural Resou			Form C-104 Revised 1-1-89 See Instructions	
DISTRICT II P.O. Drawer DD, Artesia, NM \$821			ATION DIVISION Box 2088 Mexico 87504-2088				at Bottom of Page	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87								
I.	T	EST FOR AL		L AND NA	AUTHOR	IZATION AS		
Operator Conoco Inc.						1	API No.	
Address 10 Desta Drive	Ste 100W.	Midland.	 I'X 79'	705			<u>0-025-26</u>	182
Reason(s) for Filing (Check proper b					et (Please esp	lain)		
New Well	C Où	Change in Transpo XX Dry Ga			•	,		
Change in Operator	Casinghead		·		BUILVE N	OVERBER	1, 1993	
f change of operator give name nd address of previous operator								
L DESCRIPTION OF WE								
SEMU TUBB A				ing Formation B (OIL)			of Lease Federal or Fee	Lease No. LC 031670B
Location N	. 760				10			
Unit Lotter 20	······		m The $\frac{S(1)}{1}$		<b>1</b> 6	<u> </u>	set From The $\frac{\gamma}{2}$	IESTLin
SectionTow	nambip 20 S	Range	38	<u>E, n</u>	MPM, LR	<u>A</u>	·	County
I. DESIGNATION OF TR	ANSPORTER		) NATU					
EOTT ENERGY CORP (OC	0744 <del>01</del>	r Condensate			e address 10 m X 1188 .		copy of this for TX 772	m is to be sent) 251–1188
Name of Authorized Transporter of C WARREN PETROLEUM CON	-	CAT or Dry (	344	Address (Giv	e address io wi	hick approved	copy of this for	m is to be sent)
f well produces oil or liquids,	Unuit S	ec. Twp.	Rge.	Is gas actuali		ONUMENT	, NM. 882	.65
ve location of tanks. this production is commingled with :			ß8E	YES		<u>    i                                </u>		
V. COMPLETION DATA		mens or poor, grve	Commings					
Designate Type of Completi	ion - (X)	Oil Well G	as Well	New Well	Workover	Deepez	Plug Back S	ame Res'v Diff Res'v
ale Spudded	Date Compl.	Ready to Prod.		Total Depth	. <u> </u>	I	P.B.T.D.	
levations (DF, RKB, RT, GR, etc.)	Name of Prod	Name of Producing Formation			<b>by</b>		Tubing Depth	
erionalicas				• •		·····	Depth Casing	
HOLE SIZE		BING, CASIN		D CEMENTING RECORD DEPTH SET			SACKS CEMENT	
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TEST DATA AND DEOL	FOT FOD AT	1 AUVABLE						
			and must i	be equal to or	exceed top allo	wable for this	depth or be for	full 24 hours.)
IL WELL (Test must be aft	JEST FOR ALL er recovery of total Date of Test		and must	be equal to or Producing Me	exceed top allo that (Flow, pe	wable for this mp, gas lift, e	depth or be for ic.)	full 24 hours.)
IL WELL (Test must be aft ate First New Oil Rua To Tank	er recovery of total	volume of load oil		be equal to or Producing Me Casing Pressu	thod (Flow, pe	wable for this mp, gas lift, e	depth or be for tc.) Choke Size	full 24 hours.)
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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.