		-			
	NO. OF COPIES RECEIVED	1 1			
	DISTRIBUTION	NEW MEXICO OIL O	CONSERVATION COMMISSION	Form C+184	
	SANTA FE	_ REQUEST	FOR ALLOWABLE	Superseaes USS C-104 and C-11	
	FILE	1	AND	Effective (-)-55	
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL G	AS	
	LAND OFFICE				
	OIL				
	IRANSPORTER GAS '	-4 1 1			
	OPERATOR	1			
	PROPATION OFFICE				
I.	Sperator	<u>i </u>			
	Conoco Inc.				
	Address				
		Ushba Navi Marrian 992	4.0		
	P.O. Box 460, Hobbs, New Mexico 88240 Reasons for tiling a Sea grouper pure.				
	Reason(s) for tiling - beck proper bus		1	_	
	New Well	Change in Trunsporter of:	Change of corpor		
	Recompletion	OII Dry Go		Company effective	
	Change in Cwnership	Casinghead Gas Conde	nsate July 1, 1979.		
	If change of ownership give name and address of previous owner				
II.	DESCRIPTION OF WELL AND	LEASE Meditio, Poor Name, Including P	ormation Kind of Lease		
	15			_	
	SouthEunice Ouit-Hos	Sett 15 Eunice TRurs (queen so.		
	Location IL 19 C			_	
	Unit Letter # ; 118	D Feet From The N Lir	ne and <u>660</u> Feet From T	The	
			2/	/ ~	
	Line of Section 20 Tov	vnshtp 22 Range	36 , NMPM,	COUNTY	
III.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	AS		
	Name of Authorized Transporter of Oll	or Condensate	Address (Give address to which approx	rea copy of this form is to be sent)	
	1/exas-New Mexico	Pipeline Co.	Box 1510, Midland,	lexas	
	166	Name of Authorized Transporter of Casingness Gas of Dry Gas Address (Give dadress to which approved copy of this form is to be sent)			
	DESILIES DATONIOUM GOAN (TO	is Corporation	odessa, Texas		
	Il well produces oil or liquids,	EEFECTIVE: February 1, 1992	Is just defined y connected? Whe	rn.	
	give location of tanks.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	If this production is commingled wit	th that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA				
	Designate Type of Completion	Cil Well Gas Well	New Weil Workover Deepen	Plug Back Same Resty. Diff. Resty.	
	Designate Type of Completion	m = (X)	1 1	i I I I I I I I I I I I I I I I I I I I	
	Date Spuaded	Date Compi. Reday to Prod.	Total Deptn	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cli/Gas Pay	Tubing Depth	
	Perforations			Depth Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD				
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		!			
		OD ALLOWARIE (Tour purch	fire recovery of total values of land oil	and must be equal to or exceed top allow-	
ν.	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 Tanks	Date of Test	Producing Method (Flow, pump, gas lif	t, esc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Zong.ii o. 1 oo				
	Actual Prod. During Test	Cii-Spis.	Water - Bbis.	Gas-MCF	
	Actual Fied, Dailing Full	J 22.2.			
				<u> </u>	
	CAS WELL			<u> </u>	
	GAS WELL Actual Prod. Tests MCF/D	Leggin of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	GAS WELL Actual Prod. Tost+MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Actual Prod. Test-MCF/D			Gravity of Condensate Choke Size	
		Length of Test Tubing Pressure (Shut-in)	Bbis. Condensate/MMCF Casing Pressure (Shut-in)		

VI. CERTIFICATE OF COMPLIANCE

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.

(Signature) Division Manager (Title)

15-79

(Date) NMOCD (5) USGS(2) PARTNERS(21) FILE

OIL CONSERVATION COMMISSION APPROVED BY District Supervisor TITLE

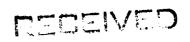
This form is to be filed in compliance with RULE 1104.

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 tasts 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.



JUN 2 5 1979 GIL CONSERVATION COMM. NOOTS, N. M.