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, Astesia, NM \$8210 OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator CONOCO INC		<u> </u>		/(11 OII	LAND NA	TOTAL	Well	<b>API No.</b> 0-025-089	975	
Addres 10 Desta Drive Ste	100W,	Midlan	d, TX	7970	05	_		·	•	
Resson(s) for Filing (Check proper box)  New Well  Recompletion  Change in Operator	Oil Casingheed	_	Transport Dry Gas Condens		TO S CURR	er (Please expl ET UP AI ENTLY HA CO E&P	DITIONA	AL GAS TY 1 & WARRI	RANSPORT	TER IG
If change of operator give same and address of previous operator			-		<u> </u>			<del></del>	<del></del>	
IL DESCRIPTION OF WELL Lease Name			Pool Nar	ne, laciudi	ing Formation		Kind	of Lease	L	esse No.
SOUTH EUNICE UNIT		17	i	-	VRS QN,	SO. <241	130>	Federal of Federal	k FEE	<u> </u>
Unit Letter	: 1980			<b>The</b> SO	п	660 LEA		est From The	WEST	Line
Section Township	22 S		Range	36	E , N	MPM, Lilli	<u> </u>			County
II. DESIGNATION OF TRAN Name of Authorized Transporter of Oil TEXAS NEW MEXICO PL CO.		or Conden		NATU	Address (Giv		• •	t copy of this fo NM. 882		ent)
Name of Authorized Transporter of Casing FEXACO EXPL & PROD. INC.		THE	or Dry G	e4	1		• • •	OKLA. 7		int)
if well produces oil or liquids, give location of tanks.	Unit :	Sec. 28	<b>Twp.</b> 22 S	36 E	Is gas actually YES	y connected?	Whee		1102	
( this production is commingled with that f V. COMPLETION DATA		Cil Well		comming!	New Well	Workover	Despen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion - Data Spudded	- (X) Date Compl	. Ready to	Prod.		Total Depth	l	<u> </u>	P.B.T.D.		1
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Ges Pay			Tubing Depth  Depth Casing Shoe		
Perforations										
		mnic	CASDI	CAND	CE) CE) TITL	IC DECOR	<u> </u>			
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
								-		-
7. TEST DATA AND REQUES OIL WELL (Test must be after re				and mad	he equal to or	errord top all	ovable for the	is death or he f	or full 24 hou	rs.)
Date First New Oil Rua To Tank	Date of Test		7 1000 04	ent mess	Producing Me	thod (Flow, pa	omp, gas lift,	etc.)	- ,	, <u>, , , , , , , , , , , , , , , , , , </u>
Length of Test	Tubing Pressure				Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbis.			Water - Bols.			Gas- MCF			
a commit	<u> </u>		-						-	
GAS WELL Actual Prod. Test - MCF/D	Leagth of Test				Bbis. Condensests/MMCF			Gravity of Condensate		
Testing Method (pisot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
Printed Name	tions of the C that the information the control moving and the control	Dil Conservention give I belief.	y SPEC			Approve	d AL SIGNE	ATION ( FEB 2 1 D BY JERRY	1 1994 SEXTON	
2-16-94 Date	915-6	586–54: Teleş	24 shoes No.							

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.