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 88210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Ι	-	TO TRAN	ISPORT O	L AND NA	TURAL G	AS					
Operator Conoco Inc.							API No. 0-025-25189				
Address 10 Desta Drive S	te 100W	Midlan	а ту 70	705			0-025-23	0189			
Resson(s) for Filing (Check proper box)	100/1,		G, IN 70		et (Please exp	dain)			-		
New Well			nasporter of:		(,					
Recompletion	Oil Casinghee	ŽŽ∏ 1Gas∏ C	ondenmen	EFF	ECTIVE N	OVEMBER	1 1993				
If change of operator give name and address of previous operator			<u> </u>								
II. DESCRIPTION OF WELL	AND LEA	SE						· · · · · · · · · · · · · · · · · · ·			
WARREN UT BLINEBRY TUE		Well No. P	ool Name, Includ ARREN BLI	_	B12 () \$ ()		of Lease Federal or Fe	_	ess No. 634580		
Location F	1000					·			034500		
Unit Letter	_ :1980	F	set From The	ORTH Lie	and19	<u>80 </u>	et From The .	WEST	Line		
34 Section Townshi	20	S R	38	E N	MPM, LE	A			County		
III. DESIGNATION OF TRAN	ISPORTE	R OF OIL	AND NATU	RAL GAS							
Name of Authorized Transporter of Oil EOTT OIL PIPELINE CO.	EO	Continue	Dinalia II	Address (Giv	address to w				1		
EOTT OIL PIPELINE CO. (EEC Effective 4-1-94 P.O. BOX 4666, HOUSTON, TX. 77210-466 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be so											
TEXACO EXPL & PROD CO.				P.O. BOX 3000, TULS				, OKLA. 74102			
If well produces oil or liquids, give location of traks.			mp. Rose. OS 138E	is gas actually YES	y connected?	When	.7				
If this production is commissed with that IV. COMPLETION DATA	from any othe	r lease or poo	d, give comming	ing order numb	Hef:						
		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion Date Soudded		Ready to Pr	<u>l</u>	Total Depth		<u>i </u>	P.B.T.D.	<u> </u>	<u>i</u>		
						1.5.1.5.					
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth					
Perforations							Depth Casing Shoe				
TUBING, CASING AND CEMENTING RECORD											
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT				
			·								
/. TEST DATA AND REQUES OIL WELL (Test must be after to									,		
OIL WELL (Test meet be after n Date First New Oil Rua To Tank	Date of Test	d volume of i	oad oil and must	Producing Me				or pull 24 hour	3.)		
Length of Test	Tubing Pressure			Casing Pressu	, , , , , , , , , , , , , , , , , , ,		Choice Size				
Actual Prod. During Test	Oil - Bbis.			Water - Pols.			Gas- MCF				
GAS WELL	<u> </u>										
Actual Prod. Test - MCF/D	Length of Test			Bbis. Condensate/MMCF			Gravity of Condensate				
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Prescure (Shut-in)			Choka Size				
								<u>.</u>	;		
VI. OPERATOR CERTIFIC					TE CON	ISERVA	YION I	DIVISIO	N		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				NOV 0 5 1993							
is true and complete to the best of my k	mowiedge and	belief.		Date	Approve	d					
Die Kreeky					By ORIGINAL SIGNED BY JERRY SEXTON						
Signature BILL R. KEATHLY OR. STAFF ANALYST				By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR							
Printed Name 10-39-33	915-6	886-5424	le :	Title_	<u> </u>						
Date		Telepho	ss 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.