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LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

Operator <u>CONOCO, Inc.</u>	
Address <u>P.O. Box, Hobbs, NM</u>	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name <u>Warren Unit Btry 2</u>	Well No. <u>75</u>	Pool Name, Including Formation <u>Blaine by Cold Gas</u>	Kind of Lease <u>Leasehold</u>	Lease No. <u>LC 06395-8</u>
Location				
Unit Letter <u>K</u>	1980	East From The <u>South</u>	Line and <u>1980</u>	East From The <u>West</u>
Line of Section <u>34</u>	Township <u>20-S</u>	Range <u>38-E</u>	NMPM <u>Lea</u>	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <u>Shell Pipeline Co. Midland, Texas</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <u>Getty Oil Co. El Paso, NM</u>	
Is well produces oil or liquids, give location of tanks.	Unit <u>L</u>	Sec. <u>33</u>
	Twp. <u>20</u>	Rge. <u>38</u>
	Is gas actually connected? <u>yes</u>	When <u>8-9-79</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res't. <input type="checkbox"/>	Diff. Res't. <input type="checkbox"/>
Date Spudded <u>5-13-79</u>	Date Compl. Ready to Prod. <u>7-12-79</u>		Total Depth <u>6130</u>		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) <u>3520 G.L.</u>	Name of Producing Formation <u>Blaine by</u>		Top Oil/Gas Pay <u>5812</u>		Tubing Depth <u>5818</u>			
Perforations <u>5812 - 6023'</u>					Depth Casing Shoe			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12 1/4</u>	<u>8 5/8</u>	<u>1500</u>	<u>6965 x 6100</u>
<u>7 7/8</u>	<u>5 1/2</u>	<u>6130</u>	<u>19475 x 5100</u>
	<u>2 3/8</u>	<u>5818</u>	

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 <u>8-9-79</u>	Date of Test <u>8-13-79</u>	Producing Method (Flow, pump, gas lift, etc.) <u>Pump</u>	
Length of Test <u>24 hrs</u>	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. <u>32</u>	Water - Bbls. <u>4</u>	Gas - MCF <u>214</u>

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Bruce A. Lee
(Signature)
Administrative Supervisor
(Title)

AUG 31 1979

7 MOC'D (5), NM File (4), File

OIL CONSERVATION COMMISSION

APPROVED: SEP 4 1979, 19
BY: [Signature]
TITLE: SUPERVISOR DISTRICT

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 tests 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.

CONOCO INC.

P. O. Box 460
Hobbs, New Mexico

New Mexico Oil Conservation Division
P. O. Box 1980
Hobbs, New Mexico 88240

Gentlemen:

In compliance with New Mexico Oil Conservation Division Rule III, we are submitting below a list of deviation surveys taken on Conoco Inc. Warren Unit - Blinby No. 75, located Unit K Section 34, Township 20-S, Range 38-E, Lea County, New Mexico.

DEPTH	DEGREE	DEPTH	DEGREE	DEPTH	DEGREE
<u>750</u>	<u>1/4</u>	<u>3152</u>	<u>1 3/4</u>		
<u>500</u>	<u>1/2</u>	<u>3989</u>	<u>1</u>		
<u>1077</u>	<u>1</u>	<u>4486</u>	<u>1 1/4</u>		
<u>1250</u>	<u>1</u>	<u>4990</u>	<u>1</u>		
<u>1423</u>	<u>1 1/2</u>	<u>5464</u>	<u>1</u>		
<u>1500</u>	<u>1 1/2</u>	<u>5793</u>	<u>1</u>		
<u>2000</u>	<u>1 1/4</u>				
<u>2490</u>	<u>2</u>				
<u>2635</u>	<u>2</u>				
<u>2842</u>	<u>2</u>				
<u>2473</u>	<u>1 1/4</u>				

Yours very truly,

Eric N. Lee

Subscribed and sworn to before me, a Notary Public, in and for Lea County, New Mexico, this 31st day of August, 1979.

2-20-81
My Commission Expires

W. J. H. H. H.
Notary Public