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

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

1					BLE AN L AND N			ZATION AS					
Operator Conocc Inc.										Well API No. 30-025-26540			
Address 10 Desta Drive S	Ste 100W	Midl	and	TY 79	9705	-			30-025-	26540			
Reason(s) for Filing (Check proper box)		4 III.u.i	COLIC 4	IV I		Other (Pi	ease erni	gin)					
New Well		Change in			<u> </u>	June (3 a	-ше стра						
Recompletion	Oil Casingheac	XX Gen []	Dry Ga		H	EFFECT	CIVE 1	NOVEMBE	R 1 199;	3			
f change of operator give name and address of previous operator													
II. DESCRIPTION OF WELL	ANDIFA	CE				7.000				71.			
Lesse Name BURGER B-20	Well No. Pool Name, Includ				- 1 -				of Lease No. Redexal or Fee LC 031670B				
Location G	1980	<u> </u>					1/	200			<u> </u>		
Unit Letter20	- :		Feet Fro	om The	NORTH I	Line and	13	980 <u> </u>	est From The	EAST	Line		
Section 20 Townsh	ip 20	S	Range	38	B E	NMPM,	L	EA			County		
II. DESIGNATION OF TRAN	SPORTE	R OF O	IL ANI	D NATU	RAL GA	S							
Name of Authorized Transporter of Oil EOTT OIL PIPELINE CO.	C 773	or Conde			Address (6	Give add				form is to be s			
Name of Authorized Transporter of Casin			or Dry (Gas -						77210-46 form is to be s			
WARREN PETROLEUM					P.O.	BOX	1589		OKLA.				
if well produces oil or liquids, ive location of tanks.	Unit	Sec. (Twp 20S	Rge. 38E		elly com ES	ected?	When	. 7				
this production is commingled with that	from any othe				1				1				
V. COMPLETION DATA		Oil Well		as Well	Non We	u W			(- - 	lo 5 :	h:== 1		
Designate Type of Completion	- (X)	CON MEN		SE MOII	New We	all wor	kover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Compi	. Ready to	Prod.		Total Dept	h			P.B.T.D.	* · · · · ·			
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	ducing Fo	rmation		Top Oil/Gas Pay				Tubing Depth				
eronions													
uiuaus									Depth Casis	ig Shoe			
	π	JBING,	CASIN	G AND	CEMEN	IING R	ECOR	D	1				
HOLE SIZE	CAS	SING & TUBING SIZE			DEPTH SET				SACKS CEMENT				
										· · · · · ·			
. TEST DATA AND REQUES	T FOR AL	LLOWA	BLE		<u> </u>		•		<u> </u>				
IL WELL (Test must be after r				l and must						for full 24 hou	75.)		
Date First New Oil Run To Tank	Date of Test				Producing	Method (Flow, pu	np, gas lift, e	tc.)				
ength of Test	Tubing Pressure				Casing Pressure				Choke Size				
al Prod. During Test Oil - Rhis.					Water - Pols				Gas- MCF				
ming from During 18st	Oil - Bbls.				Water - ES	1.			GE- MC				
GAS WELL					· · · · · · · · · · · · · · · · · · ·				**************************				
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF				Gravity of Condensate				
esting Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size				
			_,				•						
T. OPERATOR CERTIFIC				CE		\bigcirc II $\stackrel{\frown}{}$	CON	 CZB\//	ATION	DIVISIO	\N.I		
I hereby certify that the rules and regular Division have been complied with and	ations of the O that the inform	il Conserv Intion give	ation n above			OIL !	CON	-			714		
is true and complete to the best of my i	mowiedge and	belief.			Dat	e App	rovec		NOV 0	5 1993			
Biello	2	a		:					e delektrisk k				
Signature BILL R. KEATHLY	SR. STA	AFF AM	או.ע פיי		By.	ar et la la	र । । । अस्ति जिल्ला	o seriesta. Maria in incident	o degrad s ota visida	CA PUC			
Printed Name			Title		Tal								
10-29-93	915-	-886-5	424		1111	9			-				

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.