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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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-1
Effective 1-1-65

I. Operator
Conoco Inc.
Address
P.O. Box 460 Hobbs, NM 88240
Reason(s) for filing (Check proper box)
New Well ☒ Change In Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change In Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Britt B Well No. 27 Pool Name, including Formation Undesignated Abo Kind of Lease State, Federal or Fee LC-031621(b) Lease No.
Location
Unit Letter G ; 1980 Feet From The N Line and 1980 Feet From The E
Line of Section 15 Township 20-S Range 37-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒ Address (Give address to which approved copy of this form is to be sent)
Arco Pipeline Corporation P.O. Box 1190 Midland, TX
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒ Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company P.O. Box 1384 Jal, NM
If well produces oil or liquids, give location of tanks. Unit G Sec. 15 Twp. 20 Rge. 37 Is gas actually connected? yes When 12-16-80

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 8-05-80	Date Compl. Ready to Prod. 10-18-80	Total Depth 7936'	P.B.T.D. 7898'					
Elevations (DF, RKB, RT, GR, etc.) GL 3562'	Name of Producing Formation Abo	Top Oil/Gas Pay 7046'	Tubing Depth					
Perforations 7046' - 7056'	Depth Casing Shoe 7936'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-5/8"		1272'		1035			
8-3/4"	7"		7935'		3400			
	2-3/8"		7026'					

V. 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 lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1175	Length of Test 24.0	Bbls. Condensate/MMCF 0	Gravity of Condensate NA
Testing Method (pilot, back pr.) Flow	Tubing Pressure (Shut-in) 2550 psi	Casing Pressure (Shut-in) NA	Choke Size 9/64"

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.

Jane A. Wier
(Signature)

Administrative Supervisor

January 21, 1981
(Date)

OIL CONSERVATION COMMISSION
JAN 21 1981

APPROVED _____, 19

BY _____

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 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 multiple completed wells.