

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

1. Operator name and Address  Conoco Inc. 10 Desta Dr. Ste 100W Midland, Tx. 79705-4500		2. OGRID Number  005073
		3. Reason for Filling Code CG (Effective 7-1-98)
4. API Number  30 - 0 25-27090	5. Pool Name  Blinebry Oil and Gas	6. Pool Code  06660
7. Property Code  003078	8. Property Name  SEMU Burger B	9. Well Number  113

II. Surface Location

UL or lot. no.  E	Section  20	Township  20S	Range  38E	Lot. Idn	Feet from the  1650	North/South Line  North	Feet from the  990	East/West Line  West	County  Lea
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11 Bottom Hole Location

UL or Lot	Section	Township	Range	Lot. Idn.	Feet from the	North/South Line	Feet from the	East/West Line	county
12 Lse Code  F	13. Producing Method Code  P	14. Gas Connection Date	15. C-129 Permit Number	16. C-129 Effective Date	17. C-12b Expiration Date				

III. Oil and Gas Transporters

18 Transporter OGRID	19. Transporter Name and Address	20. POD	21. O/G	22. POD ULSTR Location and Description
026450	Dynegry Midstream Services 6 Desta Drive, Suite 3300 Midland, Tx. 79705	0768830	G	M 20 20S 38E

IV. Produced Water

23. POD	24. POD ULSTR Location and Description
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V. Well Completion Data

25 Spud Date	26 Ready Date	27. TD	28 PBTD	29 Perforations	DHC,DC,MC
30. Hole Size	31. Casing & Tubing Size	32 Depth Set	33. Sacks Cement		

VI. Well Test Data

34. Date New Oil	35. Gas Delivery Date	36. Test Date	37. Test Length	38. Tbg. Pressure	39. Csg. Pressure
40. Choke Size	41. Oil	42. Water	43. Gas	44. AOF	45. Test Method

[ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief

Signature: *Bill R. Keathly*

Printed name: Bill R. Keathly

Title: Sr. Regulatory Specialist

Date: 9-11-98      Phone: (915) 686-5424

**OIL CONSERVATION DIVISION**

Approved by: *Chris Williams*

Title: DISTRICT SUPERVISOR

Approval Date: 9-13-98

47. If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date
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