GTATE OF VIEW MEANUE INGY AND MINERALS DEPARTMENT		TION DIVISION	form C-104 Revised 10-1-78
UISTRIBUTION	Р. О. ВО Santa ee new	X 2086 V MEXICO 87501	
F 11.8	5461412, 626		
LAND OFFICE			
TRANSPORTER DIL	REQUEST FOR	ND	
0 45. 0 PERATOR PADRATION OFFICE Operator	AUTHORIZATION TO TRANSF	PORT OIL AND NATURAL GAS	
Conoco Inc.	•		
Address D. D. Porr (60.1	Habba Nor Morriss 99740		
P. U. BOX 400, Reason(s) for filing (Check proper be	Hobbs, New Mexico 88240	Other (Picase explain)	· · · · · · · · · · · · · · · · · · ·
New Well X	Change in Transporter of:		
Recompletion		• _	
Change in Ownership	Casinghead Gas Conden		
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL ANI) LEASE		
Lease Name	Well No. Pool Name, Including Fo		ral or Fee B-1536
State "E"	11 Eunice 7-Rivers	s Queen, South [Shirt, Con	B-1536
1	30 Feet From The <u>South</u> Lin	e and Feet From	n TheEast
Line of Section 17 T	mahip 22S Range	36Е , ммрм,	Lea County
DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURAL GA	S Address (Give address to which app	roved copy of this form is to be sent)
Texas New Mexico Pipel		P. O. Box 2528, Hobbs	New Mexico 88240
Name of Authorized Transporter of C	asinghead Gas [Y] or Dry Gas	Address (Give address to which app	roved copy of this form is to be sent)
Phillips Petroleum Com	pany GPM Gas Corporation	EFFECTIVE: February 1, 199 4001 Penbrook, Odessa	² Texas 79762
If well produces oil or liquids,	Unit Sec. Twp. Ree.	Is gas octually connected?	vhen 6-13-83
give location of tanks.	with that from any other lease or pool,		0-13-85
COMPLETION DATA	Oil Well Gus Well	New Well Workover Deepen	Plug Back Same Res'v. Dill. Rec
Designate Type of Complet	ion $-(X)$ X	X	
Date Spudded	Date Compl. Ready to Pred.	Total Depth	P.B.T.D.
4-16-83	5-28-83	3950'	3812'
Elevations (DF, RKB, RT, GR, etc.)		Top Oil/Gas Pay	Tubing Depth
3555' GR.	Eunice 7-Rivers Queen	3710'	3676 ' Depth Casing Shoe
3710' - 3796'			3950'
	TUBING, CASING, AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
12-1/4"	8-5/8"	<u>997'</u> 3950'	<u>409 Sx.</u>
7-7/8"	5-1/2"	3950*	<u>1180 5x.</u>
· · · · · · · · · · · · · · · · · · ·			
TEST DATA AND REQUEST	able for this de	pth or be for full 24 hours)	il and must be equal to or exceed top all
Date First New Oil Run To Tanks	Dote of Test	Producing Method (Flow, pump, gas	**;1, \$15*/
-5-28-83	7-12-83 Tubing Pressue	Pumping Casing Pressure	Choke Size
24 Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	Gas - MCF
34	30	4	25
<u>.</u>			
GAS WELL	Length of Test	Bbls. Condenscie/MMCF	Gravity of Condensate
Actual Prod. 1001-MCT/D	,		
Testing Method (puol, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-13)	Choke Size
CERTIFICATE OF COMPLIA	NCE	DIL CONSERVATION DIVISION	
		ABBROVED AUG 1 1 1983	
I hereby certify that the rules and	regulations of the Oll Conservation	APPROVED	<u></u>
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		BYORIGINAL SIGNED BY JERRY SEXTON	
		DISTRICT I SUPERVISOR	
	. · ·	TITLE	
		This form is to be filed in compliance with RULE 1104.	
Naved J. Juger		If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation	
(کنوستین) Administrative Supervisor		I tests taken on the well in accordance with Hock Title	
(Tille)		All sections of this form must be filled out completely for allo- able on new and recompleted wells.	
August 9,		man a min franken t	II, III, and VI for changes of owner orter, or other such change of condition
	Dorel	well name or number, or transp	ofter, of other toch change in contra



·

,

RECEIVED MING M 1993