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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
Sez Instructions
at Bottom of Page

DISTRICT II P.O. Drawer DD, Americ, NIM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator	10 11	IANGE OF I		TOT DIE		PI No.				
Conoco Inc.	Conoco Inc.						30-025-31179			
Address 10 Desta Drive St	e 100W, Mid	land, TX	79705							
Resson(s) for Filing (Check proper box)	<u></u>		Oth	se (Please explo	sia)	<u> </u>	<del></del>			
New Well		in Transporter of:	_							
Recompletion	Oil X Casingheed Gas	Dry Ges	i eff	ECTIVE N	OVEMBER	1 1993				
f change of operator give name		_	<u> </u>	<del></del>						
and address of previous operator										
IL DESCRIPTION OF WELL Lase Name	AND LEASE Well N	lo. Pool Name, In	cluding Formation		Kind o	(Lesso	Lea	ss No.		
WARREN UT BLINEBRY TUE			LINEBRY TU	BB 0 & G	Conta	Federal or Fee	LC 06	34580		
Location D	222		MODUL	. 66	^	េក	EST	•		
Unit Letter	: 660	Feet From The	NORTH Lin		Fe-	et From The	501	Line		
Section 34 Townshi	<b>20 S</b>	Range	38 E , N	MPM, LE	A			County		
	CROPATED OF	OTE AND NA	TIDAL CAR							
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	or Con	describ	Address (Gin	e address to wi	hick approved	copy of this form	is to be sen	1)		
EOTT OIL PIPELINE CO.	(EEC)					TX. 772				
Name of Authorized Transporter of Casia	gheed Gas 👭	or Dry Gas	<b>—</b> 1			OKLA. 74		1)		
TEXACO EXPL & PROD CO.  If well produces oil or liquids,	Unit Sec.	Twp.	Rge. is gas actual		Whee					
give location of tanks.	A 28	20S 38E						··· ·		
If this production is commingled with that  [V. COMPLETION DATA]	from any other leass	or pool, give come	ningling order sum					<del></del>		
	Oil W	/eli Ges We	ll New Weil	Workover	Despee	Plug Back Sa	me Res'v	Diff Res'v		
Designate Type of Completion			Total Depth	<u> </u>	L1	P.B.T.D.		<u> </u>		
Date Spudded	Date Compl. Read	y to PROE	102 542			P.B.1.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Ges	Top Oil/Ges Pay			Tubing Depth			
Performicas							Depth Casing Shoe			
· • • • • • • • • • • • • • • • • • • •										
		G, CASING A	ND CEMENTI			T	0V0 051/5	NIT.		
HOLE SIZE	CASING &	TUBING SIZE		DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQUE	ST FOR ALLO	WARLE		<del></del>						
OIL WELL (Test must be after	recovery of total volu	me of load oil and	must be equal to o	exceed top all	owable for this	depth or be for	full 24 hours	r.)		
Date First New Oil Rua To Tank	Date of Test		Producing M	ethod (Flow, p	ump, gas uft, d	<b>sc.</b> )				
Length of Test	Tubing Pressure		Casing Press	Casing Pressure			Choice Size			
		Dela Dela	Water - Bbls.			Gas- MCF				
Actual Prod. During Test	Oil - Bbls.	Walet - Ech	Mart - Rair							
GAS WELL	<u> </u>	· <del></del>		- <del></del>		<u> </u>				
Actual Prod. Test - MCF/D	Length of Test		Bbls. Conde	Bbls. Condensate/MMCF			Gravity of Condensate			
	Tubing Pressure (Shut-in)		Cocine Proc	Casing Prescuse (Shei-in)			Choine Size			
Testing Method (pitot, back pr.)	Inping Pressure (:	MIE-12)	Casing Floor	<b>are</b> ( <b>arar</b> -ar						
VL OPERATOR CERTIFIC	TATE OF COL	MPLIANCE				ATIONED	NACIO	N.I.		
I hereby certify that the rules and regu	lations of the Oil Co	nearvation:			NSEHV	ATION D		1/1		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Date ApprovedNOV 0 5 1993						
	-		Date	3 Approve	<i></i>		<del></del>			
But Res			- ∥ Bv	ORIGINAL	SIGNED 8	Y JERRY SE)	CION			
Similar KEATHLY SR. REGULATORY SPEC.				DISTRICT I SUPERVISOR						
Printed Name 10-29-03	915-686	<b>Title</b> 1–5424	Title	·						
Date		Telephone No.	-							
			-11							

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.