

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 21, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address CONOCO INC. 10 Desta Drive Ste 100W MIDLAND, TEXAS 79705		OGRID Number 005073
Reason for Filing Code TO CORRECT POD NUMBERS		
API Number 30 - 0 25-32491	Pool Name WARREN DRINKARD	Pool Code 63080
Property Code 003122	Property Name WARREN UNIT	Well Number 114

II. Surface Location

Ul or lot no. C	Section 28	Township 20 S	Range 38 E	Lot Idn	Feet from the 660	North/South line NORTH	Feet from the 1980	East/West line WEST	County LEA
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Bottom Hole Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
F	P		10-21-94						
Lac Code	Producing Method Code	Gas Connection Date	C-129 Permit Number	C-129 Effective Date	C-129 Expiration Date				

III. Oil and Gas Transporters

Transporter OGRID	Transporter Name and Address	POD	O/G	POD ULSTR Location and Description
005108	CONOCO INC. TRANSPORTATION P.O. BOX 2587 HOBBS, NM. 88240	0774110	O	E 27 20S 38E
024650	WARREN PETROLEUM CORP P.O. BOX 67 MONUMENT, NM 88265	2813900	G	E 27 20S 38E PLEASE ASSIGN NEW POD NUMBER

IV. Produced Water

POD 0774150	POD ULSTR Location and Description E 27 20S 38E
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V. Well Completion Data

Spud Date	Ready Date	TD	PBTD	Perforations
Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement	

VI. Well Test Data

Date New Oil	Gas Delivery Date	Test Date	Test Length	Tbg. Pressure	Csg. Pressure
Choke Size	Oil	Water	Gas	AOF	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:

Printed name: BILL R. KEATHLY

Title: SR. REGULATORY SPEC.

Date: 12-29-94

Phone: (915) 686-5424

OIL CONSERVATION DIVISION

Approved by:

ORIGINAL SIGNED BY JERRY SEXTON

Title:

DISTRICT I SUPERVISOR

Approval Date:

JAN 01 1995

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

RECEIVED

NOV 10 1965
U.S. ROBB
OFFICE

New Mexico Oil Conservation Division
C-104 Instructions

22.	IF THIS IS AN AMENDED REPORT, CHECK THE BOX LABELED "AMENDED REPORT AT THE TOP OF THIS DOCUMENT"	22.	The USTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Battery A", "Jones CPD Water Tank", etc.)
23.	Report all gas volumes at 15.025 PSIA at 60°.	23.	The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and the POD has no number the district office will assign a number and write it here.
3.	Reason for filling code from the following table: NW New Well MC Recompletion CH Change of Operator AO Add oil/condensate transporter CO Change oil/condensate transporter AG Add gas transporter CG Change gas transporter RT Request for test allowable (include volume requested) If for any other reason write that reason in this box.	34.	MODA/YR that new oil was first produced
4.	The API number of this well	35.	MODA/YR that gas was first produced into a pipeline
5.	The name of the pool for this completion	36.	MODA/YR that the following test was completed
6.	The pool code for this pool	37.	Length in hours of the test
7.	The property code for this completion	38.	Flowing tubing pressure - oil wells Shut-in tubing pressure - gas wells
8.	The property name (well name) for this completion	39.	Flowing casing pressure - oil wells Shut-in casing pressure - gas wells
9.	The well number for this completion	40.	Diameter of the choke used in the test
10.	The surface location of this completion. NOTE: If the United States government survey designates a Lot Number for the location use that number in the "UL or lot no." box. Otherwise use the OCD unit letter.	41.	Barrels of oil produced during the test
11.	The bottom hole location of this completion	42.	Barrels of water produced during the test
12.	Lease code from the following table: F Federal S State P Fee J Jurisdiction N Navajo U Use Mountain Ute I Other Indian Tribe	43.	MCF of gas produced during the test
13.	The producing method code from the following table: F Flowing P Pumping or other artificial lift MODA/YR that this completion was first connected to a gas transporter	44.	Gas well calculated absolute open flow in MCF/D
14.	MODA/YR that this completion was first connected to a gas transporter	45.	The method used to test the well: F Flowing P Pumping S Swabbing Z Other method please write it in.
15.	The permit number from the District approved C-129 for this completion	46.	The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questions about this report
16.	MODA/YR of the C-129 approval for this completion	47.	The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person
17.	MODA/YR of the expiration of C-129 approval for this completion		
18.	The gas or oil transporter's OGRD number		
19.	Name and address of the transporter of the product		
20.	The number assigned to the POD from which the product will be transported by the transporter. If this is a new well office will assign a number and write it here.		
21.	Product code from the following table: O Oil G Gas		