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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

n C-104 and 1-1-89

DISTRICT II P.O. Drawer DD, Astesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS.

Operator		io in	AITO	<u> </u>		- AIVD IVA	IOIIAEO			JPI No.			
Conoco Inc.									30-025-06540				
Address 10 Desta Drive S	te 100W	. Mid	land	. T	X 79	705							
Reason(s) for Filing (Check proper box)						Oth	et (Please exp	tain)					
New Well	Oil	Change i		•	r of:								
Recompletion	EFFECTIVE NOVEMBER 1 1993												
If change of operator give name and address of previous operator			_										
	ANDIE	ACE						-					
II. DESCRIPTION OF WELL Lease Name	Well No. Pool Name, Includes				ng Formation		1	Kind of Lease		Lease No.			
LOCKHART B-12	5 HARE SIMPS			ON			State, Federal or Fee		LC	0320968			
Location E	زي (1 95	50 50	-		. N	ORTH	e and	941	E.	et From The	WEST	Line	
Unit Letter	_ : 		rest	From				T2.A	^•	K LIMIT INS.			
Section Townsh	ip 21	1 S	Rang	P	37	7 E ,N	MPM,	EA	_			County	
III. DESIGNATION OF TRAN	SPORTE	ROFO	OIL A	ND	NATU	RAL GAS							
iams of Authorized Transporter of Oil or Condensate						Address (Give address to which approved copy of this form is to be sent) P.O. BOX 4666, HOUSTON, TX. 77210-4666							
EOTT OIL PIPELINE CO.		, (XX)	~ D	Ca			UX 4666. w address to w						
	me of Authorized Transporter of Casinghead Gas TEXACO EXPL & PRODUCING INC.					P.O. BOX 3000,		0, T				·	
If well produces oil or liquids, zive location of tenior.	Unit	Sec. 12	Twp.		Rgs. 37E	is gas actuali YE	y connected?		When	7			
If this production is commingled with that	from sev ot								L				
IV. COMPLETION DATA			······································			~ 				·	1 -		
Designate Type of Completion	- (20)	Oil Well Gas			Weli	New Well	Workover	l D	oopes.	Plug Back 	Same Res'v	Diff Res'v	
Date Spudded	Date Com	pi. Ready	to Prod			Total Depth	<u> </u>			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing For						Top Oil/Gas Pay				Tubing Dep	<u> </u>		
Elevations (DF, RKB, RT, GR, etc.)	Name of P	TOGUCIDE:	POTTE	OB		1.00 0.000 1.5)				I moral toches			
Perforations						<u> </u>				Depth Casis	g Shoe		
		TIDDIC	2 (24)	STAIC	AND	CEMENT	NG RECO	3D		<u> </u>			
HOLE SIZE CASING & T						CEMENTING RECORD DEPTH SET				SACKS CEMENT			
										ļ			
					- -								
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR	ALLOV	VABL	E		he amel to a	- erroad ton a	Umunhi	le for thi	e depth or be	for full 24 h	ours.)	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of To		se of 100	a ou	ana masi	Producing M	ethod (Flow,	ритр, в	ras lift, d	uc.)			
							Casing Pressure						
Length of Test	Tubing Pr	Tubing Pressure					Casting Pressure						
Actual Prod. During Test	Oil - Bbls.					Water - Bbis.				Gas- MCF			
GAS WELL		W				Dhie Conde	asste/MMCF			Gravity of	condensate		
Actual Prod. Test - MCF/D	League of	Length of Test								,			
Testing Method (pitot, back pr.)	Tubing Pr	Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)				Choke Size		
						<u> </u>							
VI. OPERATOR CERTIFIC					E .		OIL CO	NSI	ERV	ATION	DIVIS	ON	
Division have been complied with and	d that the info	ormetice g	jiven ab							NOV O	- 1993		
is true and complete to the best of my	knowledge :	and belief.	•			Date	Approv	ed -		1107 0:	1333		
Beer R X	a de	cle	_				* \$ _ * *	er, a	ក្នុងក្នុងក	Cas i≸ilia	i dana.	4	
Signature BILL R. KEATHLY	r er o	STAFF	ANAL	YST		∥ By_	* 5.5		11:	Lety Europe			
Printed Name			Talk	-		Title	·			.			
10-29-93	91	5-686 15-686	-542. elephon										
Date				. 140		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.

RECEIVED

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