	_	·~			
	#0 - OF COPIES #ECEIVED :				
-	DISTRIBUTION	NEW MEXICO CIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND Form C-104 Supersedes 012 C-104 or Effective 1-1-55			
+	SANTA FE			Superseaes Ulá C-104 and C+1 Elfective 1-1-55	
-	U.S.G.S.	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
	LAND OFFICE				
	TRANSPORTER GAS 1				
 	OPERATOR				
1.	PROBATION OFFICE				
l	Conoco Inc.				
-	i iress				
	P.O. Box 460, Hobbs, New Mexico 83240 [cason(s) for tiling (Check proper box)]				
- 1	Reason(s) for tiling (theck proper box)		Change in Transporter of: Change of corporate name from		
	Pecompletion	Cil Dry Gas	Cu Dry Gas Continental Oil Company ef		
	Change in Ownership	Castrighead Gas Conden	July 1, 1979.		
	I change of ownership give name and address of previous owner				
H. 1	DESCRIPTION OF WELL AND I	LEASE Acti No.; Pool Name, including Fo			
/	? Wantz	7 Paddock	State, Federal	corree Patent	
	Location A		23/0 Feet From 3	1.1	
	Chit Center				
	Line of Section 21 Township 21-5 Range 37-F , NMPM, LES County				
177 1	ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
· · · · · ·	tame of Authorized Transporter of Cil Condensate Address (Give address to which approved copy of this form is to be sent)				
ļ	Texas - New Menico Pipeline Company box 1510 Midland 1exas Name of Authorized Transporter of Casinghed Obsizer of Dry Gas. Address Give address to which approved copy of this form is to be sent)				
į	Name of Authorized Transporter of Casingness Glas of Dry Gas Address (Give address to which approved copy of this form is to be sent) (28th. 01 Company Funice New Mexico				
ŀ	If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When				
Ì	give location of tanks.				
	f this production is commingled wit COMPLETION DATA	h that from any other lease or pool,	give commingling order number:		
	Designate Type of Completio	$\operatorname{on} = (X)$ Off Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty.	
	Date Spugged	Date Compi. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth	
	Retionations			Depth Casing Shoe	
-	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
}	HOCE 3122	CASING & FORMO SIZE			
-					
V. '	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow				
	OIL WELL able for this depth or be for full 24 hours) Date First New Oil Bun To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)				
	Date Flat flew Off 1.2m to Tamp	2000			
·	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
-	Actual Proa. During Test	Cil-Bbis.	Water - Bbls.	Gas • MCF	
•					
٢	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
			111N 2 6 1979 -2		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED 19		
ì	above is true and complete to the	best of my knowledge and belief.	BY Cray Con		
			TITLE District Supervisor		
	4/1/1		This form is to be filed in compliance with RULE 1104.		
-	11 41 11 10 no	alla .	wait this form must be accompa	vable for a newly drilled or despense nied by a tabulation of the familia	
	Signa Division	Managar	tests taken on the well in accordance with RULE 111.		

Division Manager

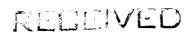
FILE

USGSW

NMOCD (5)

Fill out only Sections I. II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.

All sections of this form must be filled out completely for allowable on new and recompleted wells.



JUNE 2 1979 OIL CONSERVATION COMM. HOBBS, N. M.