

OIL CONSERVATION DIVISION
P. O. BOX 2008
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
REGISTRATION OFFICE	

Operator
Conoco Inc.

Address
P.O. Box 460 Hobbs, NM 88240

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Other (If gas is sold) GAS MUST NOT BE
FLARED AFTER 7/1/81
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED.

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name State F-1	Well No. 10	Pool Name, Including Formation Undesignated Tubb	Kind of Lease State, Federal or Fee	Lease No. B-1535
Location Unit Letter <u>V</u> <u>X</u> ; <u>330</u> Feet From The <u>S</u> Line and <u>1650</u> Feet From The <u>W</u> Line of Section <u>1</u> Township <u>21-S</u> Range <u>36-E</u> , NMPM, Lea Count				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Conoco Inc. Surface Transportation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2587, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Unit <u>V</u> <u>X</u> Sec. <u>1</u> Twp. <u>21</u> Rge. <u>36</u> Is gas actually connected? <u>No</u> When

If this production is commingled with that from any other lease or pool, give commingling order number:

II. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. R. <input type="checkbox"/>		
Date Spudded 3-20-81	Date Compl. Ready to Prod. 5-12-81	Total Depth 7000'	P.B.T.D. 6928'
Elevations (DF, RKB, RT, GR, etc.) GL 3510'	Name of Producing Formation Tubb	Top Oil/Gas Pay 6473'	Tubing Depth 6510'
Perforations 6473' - 6479'	Depth Casing Shoe 7000'		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	1320'	1020
12-1/4"	9-5/8"	5100'	1620
8-1/2"	7"	7000'	318
	2-3/8"	6510'	

III. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top
able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 5-26-81	Date of Test 6-11-81	Producing Method (Flow, pump, gas lift, etc.) Pumped	
Length of Test 24.0	Tubing Pressure 45	Casing Pressure NA	Choke Size Open
Actual Prod. During Test 153	Oil-Bbls. 20	Water-Bbls. 133	Gas-MCF Not measured

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

IV. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations 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.

Jane A. Her
(Signature)

Administrative Supervisor
(Title)

July 17, 1981
(Date)

NMOC0-5
File-1

OIL CONSERVATION DIVISION

APPROVED JUL 23 1981, 19
BY [Signature]
TITLE SUPERVISOR DISTRICT I

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper
well, this form must be accompanied by a tabulation of the deviat-
ions taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of owner-
well name or number, or transporter, or other such change of condi-

Separate Forms C-104 must be filed for each pool in multi-
completed wells.

WELL NAME AND NUMBER State F-1 #10

LOCATION Section 1, T21S, R36E, Lea County, New Mexico
(New Mexico give U.S.T&R: Texas give S, BLK, SURV. and TWP)

OPERATOR Conoco, Inc.

DRILLING CONTRACTOR MORANCO

The undersigned hereby certifies that he is an authorized representative of the drilling contractor who drilled the above-described well and that he has conducted deviation tests and obtained the following results:

<u>Degrees and Depth</u>	<u>Degrees and Depth</u>	<u>Degrees and Depth</u>	<u>Degrees and Depth</u>
<u>3/4</u> <u>199</u>	<u>1/4</u> <u>4256</u>		
<u>3/4</u> <u>402</u>	<u>1</u> <u>4757</u>		
<u>1</u> <u>806</u>	<u>3/4</u> <u>5100</u>		
<u>1/4</u> <u>1250</u>	<u>1/4</u> <u>5608</u>		
<u>1/4</u> <u>1486</u>	<u>1/2</u> <u>6148</u>		
<u>1/4</u> <u>1673</u>	<u>1/2</u> <u>6606</u>		
<u>1/4</u> <u>1860</u>	<u>3/4</u> <u>7000</u>		
<u>1</u> <u>2235</u>			
<u>1 1/2</u> <u>2452</u>			
<u>1</u> <u>2545</u>			
<u>1/2</u> <u>2935</u>			
<u>1/4</u> <u>3257</u>			

Drilling Contractor MORANCO

By Jerry Gilbert
Jerry Gilbert - Vice President Drilling

Subscribed and sworn to before me this 14th day of April 19 81

My Commission expires:

11-5-84

Brenda Williams
Notary Public
Lea County, New Mexico