	Special Control of the Control of th		
NO. OF COPIES RECEIVED	3	e.	
DISTRIBUTION	NEW MEXICO OIL C	CNSERVATION COMMISSION	Form C+104
SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-11
FILE		AND	Effective 1-1-55
u.s.g.s.	AUTHORIZATION TO TRA	NSPORT OIL AND NATURAL G	AS
LAND OFFICE			
TRANSPORTER GAS			
OPERATOR			
PRORATION OFFICE			
Cperator Cperator			
Conoco Inc	•		
Address			
P.O. Box 4	60, Hobbs, New Mexico 882	+0	
Reasons) for tiling (Check proper	00x)	Other (Please explain)	
New Well	Change in Transporter of:	Change of corpora	
Recompletion	Oil Dry Ga	=   continental off (	Company effective
Change in Ownershipi	Casinghead Gas Conder	Sale   July 1, 1979.	
If change of ownership give nam	e		
and address of previous owner _			· · · · · · · · · · · · · · · · · · ·
II. DESCRIPTION OF WELL AN	ND <sub>0</sub> LEASE		
Lease Name	State en No. Pool Hame, including F	_	
Mc Donald State A	+35 con / Jalmat Va	tes Clas State, Federal	cr Fee 6745
Location	GC.		F
Unit Letter;;	1,70 Feet From TheLin	e andFeet From T	he /-
35	- 22 - 5	36-Æ, NMPM, Le	
Line of Section U S	Township A2 - ) Range	36-/2 , MMPM, Le	<u>A</u> County
II. DESIGNATION OF TRANSPORTER OF Name of Authorized Transporter of	ORTER OF OIL AND NATURAL GA	S Acatess (Give address to which approv	ed copy of this form is to be sent;
Name of Authorized Transporter of	1 1 7 - +	Adatess (Give address to which approv	ed copy of this form is to se sent;
El Paso Re	atural (x) Co.	is gas actually connected? Whe	al New Mexico
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	is gas actually connected?	<b>::</b> -
		<del></del>	
	! with that from any other lease or noo!		
If this production is commingled V. COMPLETION DATA	with that from any other reads of poot,	give comminging order number.	
V. COMPLETION DATA	Oi. Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty, Diff. Resty.
V. COMPLETION DATA  Designate Type of Compl	Oi. Well Gas Well		Plug Back Same Resty. Ditt. Resty.
V. COMPLETION DATA	Oi. Well Gas Well		Plug Back   Same Restv. Ditt. Restv.
V. COMPLETION DATA  Designate Type of Comple Date Spudded	etion — (X)   Oi. Weil   Gas Weil     Cate Compil Ready to Prod.	New Well Workover Deepen Total Deptn	P.B.T.D.
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V. COMPLETION DATA  Designate Type of Comple Date Spudded	etion — (X)   Oi. Weil   Gas Weil     Cate Compil Ready to Prod.	New Well Workover Deepen Total Deptn	P.B.T.D.
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V. COMPLETION DATA  Designate Type of Compl Date Spudded  Elevations (DF, RKB, RT, GR, etc.)  Perforations	etion — (X)    Date Compil Ready to Prod.	New Well Workover Deepen Total Deptn Top Dit/Gas Pay  CEMENTING RECORD DEPTH SET	P.B.T.D.  Tuzing Deptn  Depth Casing Shoe
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Division Manager

(Title)

(Date)

NMOCD (5)

File

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

All sections of this form must be filled out completely for allowable 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 condition.

Separate Forms C-104 must be filed for each pool in multiply