HO. OF COPIES N. LEIVE						
DISTRIBUTIO	DISTRIBUTION					
ANTA FE						
ILE						
.s.g.s.						
LAND OFFICE						
IRANSPORTER	OIL					
THANS! ON ER	GAS					
OPERATOR	OPERATOR					
PRORATION OFFICE						
Operator						
Conquest Exploration Co						
Address						
P. O. Box 4512, Houston						
Reason(s) for filing (Check proper box)						
New Well						
Recompletion						
Change to Ownership V						

	ANTA FE		CONSERVATION COMMISSION FOR ALLOWABLE AND	Sprm C-104 Supersedie Old C-104 and C-1 Effective 1-1-65	
	S.G.S.  LAND OFFICE  I RANSPORTER  OIL	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GAS	
1.	OPERATOR GAS  OPERATOR  PRORATION OFFICE				
	Conquest Exploration	Co.,			
	P. O. Box 4512, Housto Reason(s) for filing (Check proper box New Well		Other (Please explain)		
	Recompletion Change in Ownership X	Oil Dry G	as		
	If change of ownership give name and address of previous owner	American Quasar Petrol	eum Co. of NM, One First	Midland, TX 79701 City Ctr, Ste 1000,	
J.	DESCRIPTION OF WELL AND Lease Name Brinninstool Unit Location	Well No. Pool Name, Including F  1 Brinninstool		Federal Least No.	
	Unit Letter G; 19	P80 Feet From The <u>north</u> Li	ne and 1980 Feet From	The <u>east</u>	
		wnship 23S Range	33Е , ммрм,	Lea County	
I.	Name of Authorized Transporter of Oi		Address (Give address to which appro-	•	
Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give addres El Paso Natural Gas Co. P. O. Box 149			P. O. Box 1188, Houston Address (Give address to which appropriate P. O. Box 1492, El Passer P. O. Box 1320, Hobbs. Is as actually connected?	ved copy of this form is to be sent)  O, TX 79978  NM 88240	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. G 20 23S 33E	Yes	El Paso: 7-9-75 Llano: 12-8-75	
	COMPLETION DATA	Oil Well Gas Well	give commingling order number:  New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'v	
	Designate Type of Completic				
	Date Spudded 12-31-74	Date Compl. Ready to Prod. 6-17-75	Total Depth 15,950'	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.) 3688 GR	Name of Producing Formation MOTTOW	15,930 Top Oil/Gas Pay 15,586'	15,900' Tubing Depth 12,248'	
	Perforations 15,586-15,631'		10,000	Depth Casing Shoe 15,950'	
		<del></del>	D CEMENTING RECORD		
ı	HOLE SIZE	CASING & TUBING SIZE	5120'	SACKS CEMENT 3600	
	12 1/4''	9 5/8''	12560'	3750	
	6 1/2"	5''	15,950'	1175	
٠. ٠.	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or able for this depth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lij	ft, etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
ſ	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	
I.	CERTIFICATE OF COMPLIANCE OIL CONSERVATION CO		TION COMMISSION		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			APPROVED DEC 1 0 1984 19		
!	,	and and and area.	TITLE  This form is to be filed in compliance with RULE 1104.  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,		
-	Kuy D. Bells (Signal	les les			
•	Government Relations (Tu 12/7/84	ile)			
-	12/1/0		well name or number or transport	er or other such change of condition.	