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A FE
U.S.
OFFICE
TRANSPORTER
OIL
GAS
RATOR
RATION OFFICE
for

NEW OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes OCS C-104 and C-11
Effective 1-1-75

Conoco Inc.

P.O. Box 460, Hobbs, New Mexico 88240

Unit(s) for filing (check proper box)
Well ☐ Completion ☐ Change in Ownership ☐
Change in Transporter of:
Oil ☐ Gas ☐ Dry Gas ☐ Condensate ☐
Other (please explain):
Change of corporate name from Continental Oil Company effective July 1, 1979.

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE
Well Name: Thompson 1B Federal 2
Location: G 1980 Feet From The N Line and 1980 Feet From The E
Unit Letter: G 1980
Line of Section: 18 Township: 26-S Range: 32-E, NMPM, Lea County
Kind of Lease: State, Federal or Fee
Lease No.: LC-062749 (9)

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil or Condensate: Western Oil Transportation Co.
Address: Box 3120 Midland, Texas
Name of Authorized Transporter of Gas or Dry Gas: Phillips Petroleum
Address: Odessa, Texas
Is gas actually connected? When

COMPLETION DATA
Designate Type of Completion - (X)
Date Spudded: Date Comm. Ready to Prod.: Total Depth: P.B.T.D.:
Elevations (DF, RAB, RT, GR, etc.): Name of Producing Formation: Top Oil/Gas Pay: Tubing Depth:
Perforations: Depth Casing Shoe:
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE: CASING & TUBING SIZE: DEPTH SET: SACKS CEMENT:

V. 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 allowable for this depth or be for full 24 hours)
Date First New Oil Run To Tanks: Date of Test: Producing Method (Flow, pump, gas lift, etc.):
Length of Test: Tubing Pressure: Casing Pressure: Choke Size:
Actual Prod. During Test: Oil - Bbls.: Water - Bbls.: Gas - MCF:

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:

VI. CERTIFICATE OF COMPLIANCE

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.

J. Thompson
(Signature)
Division Manager

6/19/79
(Date)

NMOCD (5)
USGS(2) FILE

OIL CONSERVATION COMMISSION
APPROVED: *Jerry Lipton*, 19____
BY: *Jerry Lipton*
TITLE: District Supervisor

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, 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.

RECEIVED

JUN 22 1979

**OIL CONSERVATION COMM.
HOUSTON, N. M.**