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		NEW MEXICO OIL	CONSERVATION COMMISSION	Form C+104		
	SANTA FE	REQUEST	FOR ALLOWABLE	Supersedes Oli C-104 and C-1!		
	FILE	4	AND	Effective 1-1-55		
	U.S.G.S.	AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL C	GAS		
	LAND OFFICE					
	TRANSPORTER GAS					
	OPERATOR					
ı	PROBATION OFFICE					
•	Cperator					
	Conoco Inc.					
	P.O. Box 460	, Hobbs, New Mexico 882	240			
	Reason(s) for filing (Check proper but		Other (Please explain)			
	New Well	Change in Transporter of:				
	Recompletion	Cil Dry G	Change of corpor			
	Change in Ownership			Company effective		
			ensate July 1, 1979.			
	If change of ownership give name and address of previous owner					
11.	DESCRIPTION OF WELL AND					
	North EL Mar Unit	± 57 EL Mar D		1 05 500		
	Location			WH-0279 (A)		
	Unit Letter + ; 19	35 Feet From The N	ine and 2090 Feet From T	The		
	Line of Section 31 To	wmship 26-5 Range	33-E, NMPM, LO	2a County		
TT	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS (INJECTION			
	Name of Authorized Transporter of Of	or Condensate	Accress (Give address to which approx			
	Name of Authorized Transporter of Co	singnead Gas or Dry Gas	Address (Give address to which approx	ved copy of this form is to be sent)		
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? Whe	en		
		ith that from any other lease or pool,	, give commingling order number:			
١٧.	COMPLETION DATA	Oil Well Gas Well	New Weil Workover Deepen	Plug Back - Same Restr. Diff. Restv.		
	Designate Type of Completi	on $-(X)$		1		
	Date Spudded	Date Compi. Reday to Prod.	Tota, Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Cti/Gas Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
		TUBING, CASING, AN	D CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
			1			
				-		
	L	<u> </u>		·		
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 allowable for this depth or be for full 24 hours)					
	OIL WELL Date First New Oil Run To Tanks	: Date of Test	Producing Method (Flow, pump, gas lif	t. etc.)		
	Bata i nat itew on itan io iang	2010 01 1031	reducing world it too, pump, gas to	.,		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Estign of fest	rubing riobbaro	Cashing prostate	Chicke Size		
	Actual Prod. During Test	Oil-Bhis.	Water-Bb.s.	Gae - MCF		
				out mo.		
	CACHETY					
1	GAS WELL Actual Prod. Test-MCF/D	T	I Dala C			
	Actual Prod. 1881-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Breezes (chut, 4 =)	Contro Green Chub (m)	Chaire Star		
	reating method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size		
/T	CERTIFICATE OF COMPLIAN	CF	OIL CONSERVA	TION COMMISSION		
	CERTIFICATE OF COMPETAN		III 93	TION COMMISSION		
	I hereby partify that the soles and	regulations of the Oil Conservation		. 19		
	Commission have been complied v	with and that the information given		11/20		
	above is true and complete to the	best of my knowledge and belief.	BY 28kg	y was		
			TITLE District Supervisor			
	(-to -		II			

(Signature) Division Manager

(Tiple) 6/14 (Date) NMOCD (5) USGS(2) PARTNERS FILE 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.

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OPERATOR			
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MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PRORATION OFFICE CONTINENTAL OIL CO Operator Address Hobbs, N.M 460 CHANGE I'M LEASE NAME - FORMERLY Reason(s) for filing (Check proper box) New Well NORTH ELMAR UNIT BTRY # 1 Dry Gas Recompletion Casinghead Gas X Condensate Change in Ownership If change of ownership give name and address of previous owner ____ DESCRIPTION OF WELL AND LEASE | Well No. | Pool Name, Including Formation Lease No. Kind of Lease NM- (02791(A) State, Federal or Fee EL MAR DELAWARE MAR UNIT NORTH _Feet From The WEST Location Feet From The NORTH Line and 2090 LEA County Aange 33-E , NMPM, Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) of Authorized Transporter of Oil BOX 1510 Midland TEXAS TEXAS NEW MEXICO PIPELINE Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas ODESSA, TEXAS Phillips Petratum Is gas actually connected? Sec. F.g. 8-22-60 Unit If well produces oil or liquids, give location of tanks. YES :32 25 M 126 If this production is commingled with that from any other lease or pool, give commingling order number: Plug Back | Same Resty. Diff. Resty. COMPLETION DATA New Well Workovet Oil Well Designate Type of Completion - (X) Total Depth Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, CR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top alloable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE Producing Method (Flow, pump, gas lift, etc.) OIL WELL Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Gas-MCF Water - Bble. Ou-Bble. Actual Prod. During Test Gravity of Condensate GAS WELL Bble. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Choke Size Casing Pressure (Shat-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION 71. CERTIFICATE OF COMPLIANCE APPROVED I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given show in true and complete to the best of my knowledge and belief. TITLE. This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled of deer well, this form must be accompanied by a tabulation of the devi All sections of this form must be filled out completely for able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of c well name or number, or transporten or other such change of cond 1-19-76 Separate Forms C-104 must be filed for each pool in mu

completed wells.

MANUEL INGC(2) NMFU(4) - FILE