STATE OF NEW MEXICO NERGY AND MINERALS DEPARTMENT · • ••

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Re	¥	ŧ:	5 C	đ	1	0-	1-	18

	OIL CONSERV	ATION DIVISION			
DISTRIBUTION		O X 2088			
TANTAFE	SANTA FE, NE	W MEXICO 87501			
U.S.G.S.					
LAND OFFICE	REQUEST FO	DR ALLOWABLE			
TRANSPORTER DAS		AND			
PROBATION OFFICE	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS			
Operator		***			
Conoco Inc.					
Address D. C. Ross (60	u_{o} h_{o} M 992/0				
P. O. Box 460 Reason(s) for filing (Check prope		Other (Please explain)			
New Well	Change in Transporter of:				
Aecompletion		Connection o	f Gas		
Change in Ownership	Casinghead Gas Conde	ensale			
If change of ownership give na					
and address of previous owner					
DESCRIPTION OF WELL					
Lease Name	Well No. Pool Name, Including I	Formation Kind of Le	Locse Nc		
Vaughn A-14	8 Jalmat Yates	State, Fede	LC-0\$0467A		
Location			**		
Unit Letter E;	2310 Feel From The North Li	ine and <u>660</u> Feet Fro	m The West		
Line of Section 14	T. mship 24-S Bange	36-Е , ммрм, Lea	County		
Line of Section 14					
DESIGNATION OF TRANSI	PORTER OF OIL AND NATURAL G	AS			
None of Authorized Transporter	ci Cli 🔂 or Condensate 🗌	Address (Give address to which app	roved copy of this form is to be sent)		
Conoco Inc. Surface	Transportation	P. O. Box 2587, Hobb	s, NM 88240 roved copy of this form is to be sent)		
Name of Authorized Transporter					
El Paso Natural Gas	Unit Sec. Twp. Rge.	P. O. Box 1384, Jal.	<u>NM 88252</u>		
If well produces oil or liquids, give location of tanks.	L 14 27 36	Yes	4/13/82		
If this production is commingle	ed with that from any other lease or pool,	, give commingling order number:			
. COMPLETION DATA			¹ Plug Back ⁻¹ Same Restv. ¹ Diff. Hest		
Designate Type of Comp	oletion - (X)	New Well Workover Deepen			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
Einvations (DF, RKB, RT, GR, e	tc.; Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
		1	Depth Casing Shoe		
Periorations			Depth Casing Shoe		
	THBING CASING AN	D CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
······					
		for recovery of total values of load a	il and must be equal to or exceed top allo		
. TEST DATA AND REQUES OIL WELL		epth or be for full 24 hours)	· · · · · · · · · · · · · · · · · · ·		
Date First New Oil Run To Tanks	Dote of Test	Producing Method (Flow, pump, gas	lift, etc.)		
			Choke Size		
Length of Test	Tubing Pressure	Casing Pressure			
Actual Prod. During Test	Oll-Bbls.	Water-Bbis.	Gas-MCF		
L	I		· ·		
GAS WELL					
Actual Prod. Test-MCF/D	Longih of Toal	Bbls. Condensule/MMCF	Gravity of Condensate		
Teeling Method (pitor, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Sbut-in)	Choke Size		
CERTIFICATE OF COMPL	IANCE	DIL COMATAV	TOTO 82/ISION		
			10 100E		
I hereby certify that the rules	and regulations of the Oll Conservation	ORIGINAL	SIGNED BY		
Division have been complied above is true and complete to	with and that the information given the best of my knowledge and belief.	IEDDA C	EXION		
		TITLE DISTRICT 1 SUPR.			
			a compliance with RULE 1104.		
Atriell A	lice	II as the second for all	awable for a newly drilled or deepen-		
- Marceral IN	Signatus)	If this is a request for anomalied by a tabulation of the deviati- well, this form must be accompanied by a tabulation of the deviati- tests taken on the well in accordance with MULZ 111.			
Administrative Supe	rvisor	tests taken on the well in accordance with HULE IT. All sections of this form must be filled out completely for allo			
	(Tule)	able on new and recompleted	wells,		
5/11/82		Fill out only Sections I, well used or number, or transport	II. III, and VI for changes of owner orter, or other such change of condition		
•	(Date)	Separate Forms C-104 mi	ist he filed for each post in multip		
•		completed wells.			

RECEIVED

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MAY 1 9 1982 HOBBS OFFICE EL FADU NATURAL GAD CUMPANT

DATE ______ April 20 _____ 19 ____ 82

	ADVICE ON WELLS TIED INTO GAS GATHERING SYSTEMS							
Name of Producer	Conoco, Inc.							
Well Name and Number _	Vaughn A-14 #8							
Location "E"	2310'FNL, 660'FWL, Sec. 14, T24S, R36E, Lea County, New Mexico							
Pool Name	Jalmat - Yates							
Producing Formation -	Yates							
Top of Gas Pay _	3,161'							
Oil or Gas Well _	011							
Gas Unit Allocation	40 Acres (SE/4 NW/4)							
Date Tied Into Gathering Systems	4-13-82							
Date of First Delivery –	4-13-82							
Gas Gathering System _	Lea County Low Pressure Gathering System							
Processed through Gaso- ine Plant (yes or no)	Yes - Jal Complex							
Station Number	68-201-01							
Remarks:								

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By: _ Jim D. Minnick Dispatching

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