

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

Form C-104
 Supersedes Old C-104 and C-110
 Effective 1-1-65

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

Operator
 Koch Exploration Company (Division of Koch Industries, Inc.)

Address
 P. O. Box 2256 Wichita, Kansas 67201

Reason(s) for filing (Check proper box) Other (Please explain)

New Well Change in Transporter of: Oil Dry Gas

Recompletion Oil Casinghead Gas Condensate

Change in Ownership

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

Lease Name Howell	Well No. 1-E	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Federal	Lease No. NM-010468
Location				
Unit Letter C	1850	Feet From The West	930	Feet From The North
Line of Section 3	Township 30N	Range 8W	NMPM, San Juan	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Plateau, Inc.	P. O. Box 1492; Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas	304 Texas St., El Paso, Texas 79978
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit C, Sect. 3, Twp. 30N, Rng. 8W	Yes 3-1-81

If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X	X					
Date Spudded 8-15-80	Date Compl. Ready to Prod. 9-6-80	Total Depth 7650	R.B.T.D.		7638			
Elevations (DF, RKB, RT, GR, etc.) GR 6222' KB 6236	Name of Producing Formation Dakota	Top Oil/Gas Pay 7513-7627	Tubing Depth 7600		Depth Casing Shoe			
Perforations 7513-7627 (Selective) Dakota								

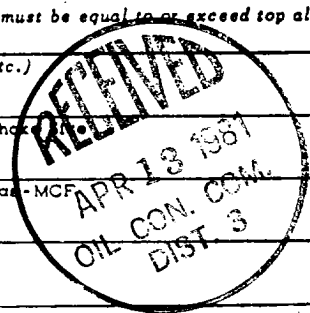
TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14-3/4	10-3/4	241	275 SX
8-3/4	7	3248	475 SX
6-1/4	4-1/2	7649	460 SX

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
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF



GAS WELL

Actual Prod. Test-MCF/D 600	Length of Test 24	Bbls. Condensate/MMCF N/A	Gravity of Condensate
Testing Method (pilot, back pr.) Back pr	Tubing Pressure (shut-in) 2400#	Casing Pressure (shut-in) 2420#	Choke Size 3/8"

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.

Frank T. Chavez
 (Signature)
 Vice President Production Operations
 (Title)
 April 6, 1981
 (Date)

OIL CONSERVATION COMMISSION

APPROVED APR 13 1981, 19____
 BY Original Signed by FRANK T. CHAVEZ
 TITLE SUPERVISOR DISTRICT # 3

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.