STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

40. SF 10FH19 SE1	****	
DISTRIBUTION		
SANTA PE		
FILE		
U.B.4.4.		
LANG OFFICE		
TRANSPORTER	8	
	-	
OPERATOR		
PROSATION OFFICE		

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Formet 08-01-83 Page 1

REQUEST FOR ALLOWABLE

AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	TO TRACE	TORT OIL AND NATO			
Operation ENERCAP Corporation					
Address Corporation	·····				
16945 Northchase Dr., Ste	. 1700 Four G	eenspoint Plaza		50	
Reason(s) for filing (Check proper box) New Well. Che	to Townson	Other (Please	espiein)		
Recognision	nge in Trunsporter el:	Company	name change from DCR H	Petroleum	
Change in Ownership		Corpora	tion to ENERCAP Corpora	tion.	
		<u> </u>			
If change of ownership give name ADDRESS and address of previous owner ADDRESS	CHANGE FROM: 460	6 FM 1960 W. St	e. 220 Houston, Texa	ıs 77069	
II. DESCRIPTION OF WELL AND LEASE					
Lorene Name Wel	No. Pool Name, Including F	ormation	Kind of Lease	Lease No.	
O'Connell Ranch Unit	Wildcat, C	hinle .	State, Federal or Fee State	L 6331	
Location					
Unit Letter D : 330 Fee	H From The N	e ced <u>990</u>	Foot From The W		
Line of Section 15 Township	11N	25B	Guadalupe		
Charlet Jestiff Lowiship	TTD Range	ZOB , NMPM,	GuadaTupe	County	
III. DESIGNATION OF TRANSPORTER	OF OIL AND NATURAL	GAS			
Name of Authorized Transporter of Oil	or Condensate		s which approved copy of this form is to	be sentj	
		<u></u>			
Name of Authorized Transporter of Casinghead G	es Or Dry Gas	Address (Give address t	o which approved copy of this form is to	be sene)	
	·	ļ.,			
If well produces oil or liquids, unit que location of tanks.	Sec. Twp. Rqe.	is gas actually cannects	47 When		
	<u> </u>	L	<u>i</u>		
If this production is commingled with that fro	m any other lease or pool,	give commingling order	number		
NOTE: Complete Parts IV and V on reve	rse side if necessary.				
VI CERTIFICATE OF COMPLIANCE	•	CII C			
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION					
I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED FEB 2 90				90	
been complied with and that the information given is true and complete to the best of my knowledge and belief.					
		W			
		TITLE		<u> </u>	
This form is to be filed in compliance with RULE 1104,					
If this is a request for allowable for a service delited an					
well, this form must be accompanied by a tabulation			De accompanied by a telephoton of	the deviation	
Operations Analyst (Title) All sections of this form must be filled out completely (ely for allow-		
6-9-89					
(Date) Fill out only Sections I. II. III, and VI for changes of well name or number, or transporten or other such change of con			of condition		
	Separate Forms C-104 must be filed for each pool in mul			i in multiply	
	•	completed wells.		* - *	