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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410	REQ	UEST F	OR AL	TOWA	BLE AND	AUTHOR						
I,	<u> </u>	TO TR	ANSP	ORT OI	L AND NA	TURAL G		INVAV.				
Orbit Enterprises, Inc.							API No. 0-025-21703					
Address c/o OIl Reports & Gas	Servi	ces, I	nc.,	P. O.	Box 755,	Hobbs,	NM 882	241				
Reason(s) for Filing (Check proper box)					Oth	es (Please exp	lain)					
New Well		Change is			E	ff. 7/	1/93					
Recompletion	Oil Codoobo	.4 6 [Dry Ga			• • •	-, -,					
Change in Operator Sir change of operator give name and address of previous operator Sir Change Sir	Cangne	ad Gas X	Conoca		······			· · · · · ·				
II. DESCRIPTION OF WELL'	ANDIE	ACF								,· · · · ·		
Lease Name	AND LE	Well No.	Pool N	rne, Includ	ing Formation		Kind	of Lease	L	ease No.		
Brown "51"	· · · · · · · · · · · · · · · · · · ·	2	Sawyer San Andres					Federa MXX		65151		
Location F .	198	80		,	North		1650 _		West			
Unit Letter	_ :		_ Feet Pro	om The	Line	and	F	eet From The	West	Line		
Section TOWNER	p 99		Range	3	BE 'NY	ирм,	Le	.a		County		
EOTT Energy Operating LP III. DESIGNATION OF TRAN				D NATU						······		
Name of Authorized Transporter of Oil	X	or Coade			1		• • •		form is to be se	•		
Enron OI1 Trading & T Name of Authorized Transporter of Casing		rtation KX	or Dry	G., [77251-1			
Warren Petroleum Co.	press Oss	0.0.1	OI DIS					copy of this form is to be sent)				
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actually		When	1 7				
rive location of tanks.	F	19	98	38E	Yes			6/1/7	<u>′8</u>			
If this production is commingled with that if IV. COMPLETION DATA	from any ou	her lease or	pool, give	s comming)	ling order numb	er:		·····				
		Oil Well	0	las Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion		i	i		i i							
Date Spudded	Date Com	pl. Ready to	Prod.		Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas P	ay		Tubing Depth				
Perforations	!						*	Depth Casin	g Shoe			
	<u></u>	TUBING,	CASIN	IG AND	CEMENTIN	IG RECOR	D	<u> </u>				
HOLE SIZE CASING & TUBING SIZE						DEPTH SET		SACKS CEMENT				
								ļ				
· · · · · · · · · · · · · · · · · · ·	ļ							ļ. <u></u>				
V. TEST DATA AND REQUES	T FOR A	LLOW	BLE		l <u></u> -	 	 	<u> </u>				
OIL WELL (Test must be after re				il and must					for full 24 hour	·s.)		
Date First New Oil Run To Tank		Producing Method (Flow, pump, gas lift, etc.)										
Length of Test	Tubing Pressure				Casing Pressur	TB.	 	Choke Size				
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF					
GAS WELL	l				 		······································					
The state of the s					Bbls. Condens	ate/MIMCF	<u></u>	Gravity of Condensals				
Festing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressur	s (Shut-in)		Choke Size					
VI. OPERATOR CERTIFICA	ATTE OF	COL	TYANT	CE				<u>. </u>		 		
VI. OPERATOR CERTIFICAL INTERPOLATION OF THE PROPERTY OF THE P				CE		IL CON	ISERV	ATION I	OIVISIO	N		
Division have been complied with and if	SEP 2 8 1993											
is true and complete to the best of my ki					Date	Approve	dSE	Y ZO E	122			
XIIIn Hel	1//					• •						
Signature / Williams					ByORI	GINAL SIG	NED BY J	ERRY SEXT	OM			
Laren Holler		A	gent		,	DISTRI	CT I SUPEI	VISOR				
Printed Name		FAF	Title	2727	Title⊸	7 1						
September 9, 1993 Date			-393- phone No					. —		•		
				1	1 1							

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

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OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	ברסו	HEST E			BLE AND		IZATION				
I,	, HEGG								1	}	
I. TO TRANSPORT OIL AND NATURAL GAS Operator Orbit Enterprises, Inc.							Well	Well API No. 30-025-21703			
Address	 			 .							
c/o OIl Reports & Gas	Servi	ces, Ir	ıc.,	P. O.	Box 755,	Hobbs,	NM 882	41			
Reason(s) for Filing (Check proper box)						er (Please exp					
New Well	1	Change in			 प	ff. 7/	1 /02				
Recompletion	Oil		Dry Ga	15 <u> </u>	Б.	11. //	1/93				
Change in Operator	Casinghe	ad Gas X	Conder	alle							
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL'	AND LE	ASE									
Lease Name Brown "51" Well No. Pool Name, Include 2 Sawyer Sa								of Lease Lease No. LC-065151			
Location					_						
Unit Letter	_ :198	80	. Feet Fr	om The	North Lim	and	1650 F	eet From The	Vest	Line	
	0.				0.50						
Section 19 Township	p 95	S	Range	38	BE , N	мрм,	Le	a		County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		or Conden		D NATU		e address to w	hick appears	l conv of this form	ie to he ee	-ut)	
Enron OIL Trading & T	X						ess to which approved copy of this form is to be sent): 1188, Houston, TX 77251-1188				
Name of Authorized Transporter of Casing		XXI	or Dry	Gas 🗔				i copy of this form			
Warren Petroleum Co.	production of the production o	€GAL.	0. <i>D</i> .,	с				ılsa, OK 7		,-,	
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actually		When				
give location of tanks.	F	19	9S	38E	Yes		I	6/1/78			
If this production is commingled with that IV. COMPLETION DATA	from any oth	her lease or	pool, giv	e comming	ling order numb	xer:					
		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v	
Designate Type of Completion		<u> </u>	Ĺ					<u> </u>		<u> </u>	
Date Spudded	Date Com	pl. Ready to	Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas P	Pay		Tubing Depth				
Perforations					<u> </u>			Depth Casing Shoe			
	,				CEMENTIN			T			
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE					DEPTH SET		SACKS CEMENT			
	 				 						
•											
	ļ							 			
V. TEST DATA AND REQUES	T FOR	LLOWA	BLE	-	L						
				oil and must	be equal to or	exceed top all	owable for the	s depth or be for j	full 24 how	rs.)	
Date First New Oil Run To Tank						Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	gth of Test Tubing Pressure				Casing Pressu	re		Choke Size			
And But Date The					Water - Bbis.			Gas- MCF			
ctual Prod. During Test Oil - Bbls.				Water - Bola.							
GAS WELL											
Actual Prod. Test - MCF/D	Length of	Test	·		Bbls. Condens	iate/MMCF		Gravity of Cond	lensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressu	re (Shut-in)		Choke Size			
AM ODED 1 MOD CONSTRUCT	<u> </u>	. CO) W	7 7 4 2 '	CC	l			1			
VI. OPERATOR CERTIFICA				CE		DIL CON	ISERV	ATION DI	VISIC	N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above										. •	
is true and complete to the best of my k					Date	Approve	d SE	P 28 199	3		
Van Shi	11				11	• •					
Men Tel	Ke-				D. OP	IGINAL SIC	SNED BY J	ERRY SEXTO	4		
Simetyre					RA	DISTRI	CT I SUPE	RVISOR	·		
Laren Holler Printed Name			gent Tide								
September 9, 1993				-2727	Title_	See years		:			
Debecuber 2, 1373			abone M		11					•	

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- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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Set : 333

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