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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Book 115 = 3460
Doh 3565
Nov 3565
Dec 3565

107335
REC'D
SEP 13 1985
CRUDE OIL DEPT.

I. Operator
J.M. Huber Corporation
Address
1900 Wilco Building, Midland, Texas 79701
Reason(s) for filing (Check proper box)
New Well Change In Transporter of:
Recompletion Oil Dry Gas
Change In Ownership Casinghead Gas Condensate
Other (Please explain)
This well is a casinghead gas well. The gas to be obtained from this well is condensate *RJM*

If change of ownership give name and address of previous owner: _____
THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE
Lease Name: Federal "27"
Well No.: 1
Pool Name, Including Formation: EK Bone Spring
Kind of Lease: ~~XXXX~~ Federal ~~XXXX~~
Lease No.: LC-064944
Location
Unit Letter: 0 ; 660' Feet From The south Line and 1980' Feet From The east
Line of Section: 27 Township: 18S Range: 33E, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil or Condensate
Enron Oil Trading & Transportation Co.
P.O. Box 1188
Houston, TX 77251-1188 Effective 7-1-88
Tesoro Crude Oil Company
8700 Tesoro Drive, San Antonio, TX 78286
Name of Authorized Transporter of Casinghead Gas
To be determined
Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks:
Unit: 0 Sec: 27 Twp: 18S Rge: 33E
Is gas actually connected? No When: November, 1985

IV. COMPLETION DATA
Designate Type of Completion - (X)
Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v. Diff. Res'v.
Date Spudded: 6/10/85 Date Compl. Ready to Prod.: 8/30/85 Total Depth: 9810' P.B.T.D.: 9779'
Elevations (DF, RKB, RT, GR, etc.): KB: 3815' Name of Producing Formation: EK Bone Spring Top Oil/Gas Pay: 8799' Tubing Depth: 9775'
Perforations: 8799-8801'; 03-04'; 06-08'; 21-26'; 29-32'; 34-35'; 9082-86'; 9105-13'; 9435-48'; 60-62'; 9659-63'; 95-99'; 9750-51'; 65-66'; (Sqz perfs. 9082-9113' w/150 SX CMT)
TUBING, CASING, AND CEMENTING RECORD
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT
17-1/2" 13-3/8" 350' 375
11" 8-5/8" 3700' 2075
7-7/8" 5-1/2" 9810' 2535
2-7/8" 9775'

V. 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: 7/15/85 Date of Test: 9/4/85 Producing Method (Flow, pump, gas lift, etc.): pump
Length of Test: 24 hrs. Tubing Pressure: _____ Casing Pressure: _____ Choke Size: _____
Actual Prod. During Test: Oil - Bbls.: 115 Water - Bbls.: 25 Gas - MCF: 95

GAS WELL
Actual Prod. Test - MCF/D: _____ Length of Test: _____ Bbls. Condensate/MMCF: _____ Gravity of Condensate: _____
Testing Method (pitot, back pr.): _____ Tubing Pressure (shut-in): _____ Casing Pressure (shut-in): _____ Choke Size: _____

VI. 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.
915/682-3794
Robert R. Glenn
Robert R. Glenn
District Production Manager
9/9/85

OIL CONSERVATION COMMISSION
APPROVED: SEP 11 1985
BY: *Edgie W. ...*
TITLE: Oil & Gas Inspector
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 multiple.