Abmit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

-

State of New Mexico
Trgy, Minerals and Natural Resources Departm

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 RECEIVED Form C-104
Revised 1-1-89
See Instructions
DEC 2 4 1990 Bottom of Page

O. C. D.

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

DISTRICT III

DOWN B. Brance Pd. Anex NM 87410

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	DEO	I ICOT E			DI E AND	ALITHOU	NTATION.				
TO TRANSPORT OIL AND NATURAL GAS											
Operator Energy Development (Weil API No. 30-005- 60570								
Address 1000 Louisiana, Suit			ton.	Teyas	77002					<u> </u>	
Reason(s) for Filing (Check proper box)	2300	11003		10,03		et (Please exp	olain)				
New Well		Change is									
Recompletion	Oil Ordinate	ad Gas X	Dry G								
Change in Operator If change of operator give name	Canngne	20 OB [A	Consor								
and address of previous operator											
IL. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Na.				ame Inchel	ing Formation		Kind	Kind of Lease No.			
TLSAU		20				ires Ass		Federal or Fee	Fee	cese 140	
Location											
Unit LetterD	_ :_ 990)	_ Foot Fr	on The N	orth Lin	e and3	30 F	set From The \underline{W}	est	Line	
Section 31 Townshi	p 8S		Range	2	9E N	мрм,	Chav	es		County	
TI DECICNATION OF TRAN	CDADTT	2D AB A	TT AN	TA NATET	DAT CAS						
II. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPURIT	or Conde		U NAIU		e address to w	which approved	copy of this for	m is to be se	eni)	
Enron Oil Trading	nsport	ation	<u> </u>	P.O. Box 10607 Midland			, Texas 79702				
Name of Authorized Transporter of Casing Trident NGL, Inc.	ghead Gas	XX	or Dry	Gus				copy of this for . The Woo		nt) , Tx 7738	
If well produces oil or liquids, ive location of tanks.	Unit	Sec.	Twp		ls gas-actual)	-	Whea	-			
this production is commingled with that	N from any od	31 her lease or	1 8S	29E	ing order num			02-88		·	
V. COMPLETION DATA			, p								
Designate Type of Completion	- (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back S	Same Res'v	Diff Res'v	
Date Spudded	Spudded Date Com				Total Depth			P.B.T.D.			
Devations (DF, RKB, RT, GR, etc.)	Name of P	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
erforstions	1				<u></u>			Depth Casing Shoe			
		TIRING	CASD	NG AND	CEMENTI	NG RECOR	2D	<u> </u>			
HOLE SIZE	SING & TL			CEMENTING RECORD DEPTH SET			SACKS CEMENT				
									· · · · · · · · · · · · · · · · · · ·		
. TEST DATA AND REQUES IL WELL (Test must be after re				.9			lassakla dan dhi	. danek an ka da	- 4.U 24 bara	1	
					Producing Method (Flow, pump, gas lift, etc.)						
· · · · · · · · · · · · · · · · · · ·								Caba Sia			
ength of Test	Tubing Pressure				Casing Pressure			Choke Size			
ctual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF			
GAS WELL							·····	l			
ctual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
			·		_	·		<u></u>			
L OPERATOR CERTIFICA				CE			ISFRV	ATION D	IVISIO)N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above										'1 T	
is true and complete to the best of my knowledge and belief.					Date Approved						
						, , , ,		NAL SIGNI	n BY		

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

Gene Linton

Printed Name

10-1-92

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

By.

Title

MIKE WILLIAMS

SUPERVISOR, DISTRICT I

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Production Analyst

750-7563 Telephone No.

Title

- 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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