+						
DISTRIBUTION	NEW	MEYICO				
ANTA FE		DECLIFE	CONSERVATION	COMMISSION	Form C-104	
ILE		KEWUES	T FOR ALLOWA	BLE	RECEIVED reedes Ol	d C-104 and C-1
1.S.G.S.	AUTUODITA	TIO: . TO	AND		Effective 1-1-	55
AND OFFICE	AUTHORIZA	TION TO T	RANSPORT OIL	AND NATURAL	. GAS	
TRANSPORTER OIL					JAN 12'89	
OPERATOR V					ወ ክ መ ገ ታ ያ	
PRORATION OFFICE					ARTESEAN COPPETE	
Operator	7				were with the fire	
Foran Oil Company V						
Suite 158, Pecan Cre	ek, 8340 Meadow	Road, Da	llas, Texas 7	5231		
Reason(s) for filing (Check proper	box)		Other	Please explain)		
New Well	Change in Transp	porter of:				
Recompletion	Oil	Dry	Gas			
Change in Ownership X	Casinghead Gas	Conc	_{iensate} 🗍 Eff	ective 9/1/	88	•
If change of ownership give nam and address of previous owner _	Enron Oil	& Gas Cor	npany, Box 22	67, Midland	, Texas 79702	
DESCRIPTION OF WELL AN	ID I FACE					
DESCRIPTION OF WELL AN	Well No. Pool No.	mme Includes	Formatt			_
				Kind of Lea	se	Lease No.
<u>Lula</u>	Z Buil	alo Valle	ey Penn	State, Feder	ral or Fee State	K-6844
Location						1
Unit Letter <u>Ď</u> ;	990 Feet From The	<u>_north</u> ∟	ine and 990	Feet From	The West	
Line of Section 7	Township 15S	Range	28E	NMPM, Ch	aves	
DESIGNATION OF TRANSPO Name of Authorized Transporter of None Name of Authorized Transporter of	Oil or Condensat	NATURAL G	Address (Give ad		oved copy of this form is to	·
Phillips 66 Natural		ory Gαs [Λ.	588 Frank P	fress to which appro hillips Bld	oved copy of this form is to g, Bartlesville,	be sent) OK 74004
If well produces oil or liquids,	Unit Sec. Tw	wp. Pge.	Is gas actually co		nen	OK 74004
give location of tanks.	· I I		Yes	i	8/2/77	
If this production is commingled COMPLETION DATA	with that from any other	lease or pool	, give commingling	order number:		 J
	Oil Well	Gas Well	New Well Work	over Deepen	Plug Back Same Res*	
Designate Type of Comple	tion $-(X)$	ļ		Josephin	Find pace Same Mes.	v. Diff. Res'v.
Date Spudded	Date Compl. Ready to I	Prod.	Total Depth	<u> </u>	P.B.T.D.	1
Elevations (DF, RKB, RT, GR, etc.	Name of Producing For	mation	Top Oil/Gas Pay		Tubing Depth	
Perforations						ļ
					Depth Casing Shoe	
						ļ
	TUBING,	CASING, AN	D CEMENTING RE	CORD		
HOLE SIZE	CASING & TUBI			H SET	EACHE ST.	<u> </u>
					SACKS CEME	
					Fost ID-3	
					1-26-89	
					- Ch Dr	
EST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	fter recovery of total	volume of load oil	and must be equal to or exc	read to all
OIL WELL		able for this de	per 01 02 101 1211 24	nours)		a sob attom-
Oate First New Oil Run To Tanks	Date of Test	-	Producing Method	Flow, pump, gas li	t, etc.)	
ength of Test	Tubing Pressure		Casing Pressure		Choke Size	
Actual Prod. During Test	Oil-Bbis.		Water-Bbls.		Ces Vos	

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 Size	
Actual Prod. During Test	Oil-Bbis.	Water-Bbis.	Gas-MCF	
				

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

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.

Joseph Wa. Lon
(Signature) Pres. Lut
(Title) 12-30-88

(Date)

OIL CONSERVATION COMMISSION

APPROVED	18 ⁸ 1 6 1089	
BY	Oligard Signed By	
TITLE	AMI is Medicarro	

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.

Senerate Forms C-104 must be filled for each pool in multiply