NO. OF COPIES BECEIVED		• -		
DISTRIBUTION	NEWNEY		1	
SANTA FE	DEO NEW MEXICO	OOL CONSERVATION COMMISSION UEST FOR ALLOWABLE	→ Form C-104	
FILE		AND	Supersedes Old C-104 and C Effective 1-1-65	
U.S.G.S.	AUTHORIZATION T	OFTRANSPORT OIL AND HATURA	AL CAS	
LAND OFFICE	_	RECEIVED BY	IL GAS	
TRANSPORTER OIL	<b>-</b>		•	
OPERATOR GAS		MAR 24 1987		
PRORATION OFFICE	-			
Operator	<del></del>	O. C. D.		
Enron Oil & Gas Compa	anv /	ARTESIA, OFFICE		
Address				
P. O. Box 2267, Midla	and. Texas 79702			
Reason(s) for tiling (Check proper bo	)x)	Other (Please explain)		
New Woll	Change in Transporter of:	Į.	ton N	
Recompletion	OII	Dry Gas     Change Opera	tor Name	
Change in Ownership X	Casinghead Gas	Condensate		
If change of ownership give name and address of previous owner	Belco Development Co	orp., Box 2267, Midland, T	over 70702	
***		orp., box 2207, Midiand, 1	exas /9/02	
II. DESCRIPTION OF WELL AND	LEASE	* **	• :	
Lease Name	Well No. Pool Name, Inclu	ding Formation Kind of L	ease Lease No.	
Brigham H	1 Grayburg-	Jackson Queen GRB SAState, Fee	deral or Fee	
Location		July Die	Federal JLC029342	
Unit Letter L: 23	40 Feet From The SOUT	h Line and 330 Feet Fr	om The West	
		7 661 7 10	om The West	
Line of Section 21 To	ownship 17S Rang	e 30E , NMPM,	Eddy County	
***			County	
II. DESIGNATION OF TRANSPOR  Name of Authorized Transporter of Of	TER OF OIL AND NATURA	L GAS	•	
1		Address (Give address to which ap	proved copy of this form is to be sent)	
Navajo Pipeline Comp		Dr 159, Artesia, NM 8	38210	
Name of Authorized Transporter of Co	<del></del>	Address (Give address to which ap	proved copy of this form is to be sent)	
Phillips 66 Natural (		588 Frank Phillips Bld	lg., Bartlesville, OK 7400	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Po	is gas actually connected?	When	
	E 21 17 3		4/7/66	
If this production is commingled wi	ith that from any other lease or	pool, give commingling order number:		
V. COMPLETION DATA	Oil Well Gas W	vell New Well Workover Deepen		
Designate Type of Completic	on – (X)	vell New Well Workover Deepen	Plug Back   Same Resty. Diff. Resty	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	1 1	
	Date Compil freddy to Pidd:	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!1/Gas Pay		
		Top On Gas Pay	Tubing Depth	
Perforations				
			Depth Casing Shoe	
	TURING CASING	, AND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE		5.646.554545	
		DEFINSE	SACKS CEMENT	
			Post Z0-3	
			3-27-82	
			- the ap	
. TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must	be after recovery of total volume of load o		
OIL WELL	able for t	his depth or be for full 24 hours)	it and must be equal to or exceed top allow	
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-Bbls.	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 COMPLIANC	Œ	OIL CONSERV	ATION COMMISSION	
		· I		
I hereby certify that the rules and re	egulations of the Oil Conservat	ion APPROVED	3 1987	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		ven   Milo Mei	APPROVED Original Signed By  BY Mike Williams  Oil & Gas Inspector	
		TITLE	ispector	
1.00				
Better Deldo	( <sub>1</sub> )		compliance with RULE 1104.	
(Signal	iwe)		ewable for a newly drilled or deepene.  anied by a tabulation of the deviation	
Betty Gildon, Regulatory Analyst			tests taken on the well in accordance with RULE 111.	
2/12/07 (Title)			ust be filled out completely for ellow-	
2/13/87	<u> </u>	able on new and recompleted w	•	
(Date	e)		II. III, and VI for changes of owner read or other such change of condition	
			at be filed for each pool in multipl	