	DISTRIBUTION SANTA FE	AND			Form C + 104 Supersedes Old C+104 and C+1 Effective 1+1+65	
	LAND OFFICE IRANSPORTER OIL GAS	AUTHORIZATION TO T	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
	OPERATOR PROBATION OFFICE		MAR 24 1987 O. C. D.			
	Operator	·· l				
	Enron Oil & Gas Con Address	npany ·	ARTESIA, OFFI	<u>се</u>	· · · · · · · · · · · · · · · · · · ·	
	P. O. Box 2267, Mic Reason(s) for filing (Check proper	lland, Texas 79702	Other (Plea	se explaint		
	New Well Recompletion	Change in Transporter of:				
	Change in Ownership X		Gas Change	e operator nam	ne	
	If change of ownership give name and address of previous owner	Bellorth Petroleum Co	prporation, Box 2	267, Midland,	Texas 79702	
I	I. DESCRIPTION OF WELL AN	D LEASE Well No. Pool Name, Including				
	Cowtown Loyd	1 Travis Upper		Kind of Lease State, Federal or F	(C = 0+)	
	Unit Letter I ; 1830 Feet From The SOuth Line and 510 Feet From The east					
	Line of Section 14 Township 18S Range 28E , NMPM, Eddy County					
71)	. DESIGNATION OF TRANSPO	ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oll X or Condensate Address (Give address to which approved copy of this form is Navajo Pipeline Company						
	Name of Authorized Transporter of (Drawer 159, Artesia, NM 88210 Address (Give address to which approved copy of this form is to be sent)				
	Phillips 66 Natural Ga	us Company Unit Sec. Twp. Pge.	588 Phillips Bldg., Bartle			
	If well produces oll or liquids, give location of tanks.	<u> </u>	is gas actually connect	ed? When 4/14		
IV	If this production is commingled v. COMPLETION DATA	with that from any other lease or pool	, give commingling orde	r number:		
	Designate Type of Complet	ion - (X)	New Well Workover	Deepen Plug	Back Same Res'v. Diff. Res'v.	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.	T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!l/Gas Pay	Тирії	ng Depth	
	Perforations			Depti	Casing Shoe	
	TUBING, CASING, AND CEMENTING RECORD					
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SE		SACKS CEMENT	
				<i>f</i>	est FO-3	
					2-27-87	
v	TEST DATA AND REQUEST D		1		ha GT! EPN	
V i	EST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allou able for this depth or be for full 24 hours) Date First New Cil Run To Tanks Date of Test Producing Motined (Flow, pump, gas lift, etc.)					
			Producing Method (Flow	, pump, gas lijt, etc.)	•	
	Length of Tust	Tubing Pressure	Casing Pressure	Choke	s Size	
	Actual Prod. During Test	Oil+Bbla.	Water - Shis.	Gas-	MCF	
	GAS WELL					
	Actual Prod. Test-MCF/D	Longth of Test	Bbls. Condensate/MMCF	Gravit	y of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Fressure (Shut-	in) Choke	Size	
ا ۲۱.	CERTIFICATE OF COMPLIAN	CE	011 6	ONSERVATION		
	hereby certify that the rules and regulations of the Oil Conservation commission have been complied with and that the information given			OIL CONSERVATION COMMISSION		
			Origi	Original Signed By		
-	Kitty Seldon		This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despend 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 sllow- able on now and recompleted wells.			
_	Betty Gildon, Regula					
-	(<i>Tit</i> 3/9/87					
-	(Da	ie)	Fill out only Sociona I, II, III, and VI for changes of owner, well usme or number, or transporter, or other such change of condition.			
					od for each pool in multiply	