1	-	-				_				· · ·	
Submit 5 Copies Appropriate District Office		Energy, I	-		lew Mexico tural Resource	es Deparan		Cared		C-104 21 d 1-1-89 structions	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II						ATION DIVISION			}	tom of Page	
P.O. Drawer DD, Anesia, NM 8821	0	S	anta Fe,		ox 2088 Iexico 8750	4-2088		503	593	346	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87	410 REQ	UEST F		LOWA		UTHOR		Ibsia, Craid	CE		
I. Openator		TO TR	ANSPO	DRT OI	L AND NAT	URAL G	AS	API No.			
Xeric Oil & G	as Compa	ny /									
Address P.O. Box 5131	1 Midlar	nd. Te	xas '	79710							
Reason(s) for Filing (Check proper b					Other	r (Please exp	lain)				
New Well	Oil		a Traaspoi Dry Gai								
Change in Operator	Casinghe		Conden		 -						
If change of operator give name and address of previous operator	Sirgo Op	perati	ng,	Inc.	P.O. Bo>	<u>x 3531</u>	Midlar	nd, Tex	as 797	02	
II. DESCRIPTION OF WE	LL AND LE	· · · · · · · · · · · · · · · · · · ·			<u> </u>						
Kenwood Feder	al	Well No.			Ing Formation (Y.SR.Q	Q.GB.)		of Lesse Federal or Fe		.esie No. 029387-D	
Location	220				Couth	02			Most		
Unit LetterM		<u>.</u>	_ Feet Fro		South Line	and	F	eet From The	West	Line	
Section 19 Tow	manip 18-5	5	Range	31-E	, NM	PM, Edd	dy			County	
III. DESIGNATION OF TH	ANSPORTE	ER OF O	IL ANI	NATU	RAL GAS						
Name of Authorized Transporter of C			Energy	+-Gorp	Address (Give	address to w	hich approve	copy of this)	form is to be s	(N) 251	
Enron Oil Tradin Name of Authonized Transporter of C	G a 11 al		five 1 or Dry C		Address (Give						
If well produces oil or liquids,				,	·····						
give location of tanks.	Undit H	S∝ . 5	Twp. 195	Rge. 31E	is gas actually NO	connected?	When	7			
If this production is commingled with IV. COMPLETION DATA	that from any oth	er lease or	pool, give	commingi	ing order aumbe	r	i				
		Oil Well	G	s Well	New Well	Water	<u> </u>				
Designate Type of Complete Date Spudded		i	1			Workover	Deepen	Plug Back 	Same Res'v	Diff Res'v	
	Date Comp	N. Ready to	Prod.		Total Depth			P.B.T.D.	* <u>.</u>		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforsuions								Depth Casing Shoe			
									g snoe		
HOLE SIZE	HOLE SIZE CASING & TUBING, CASING AND					CEMENTING RECORD					
					DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQU	EST FOR A	LLOWA	BLE					L			
DIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test	u volume oj	1000 01 0	and must b	e equal to or exc Producing Metho	eed top allow	vable for this	depth or be fo	or full 24 hour	s.)	
Length of Test					••••••••••••••••••••••••••••••••••••••		········	•.)			
	I uotag Presi	Tubing Pressure Oil - Bbls.				Casing Pressure Water - Bbls.			Choke Size		
Actual Prod. During Test	Oil - Bbls.								Gas- MCF		
GAS WELL											
Actual Prod. Test - MCF/D	Length of Te	š l			bis Condensate	MMCE	·	~			
esting Method (pilot, back pr.)	Method (pilot, back pr.) Tubing Pressure (Shui-in)					1 The second			Gravity of Condensate		
	. JUINS FTESS	ne (Sumi-D	y		asing Pressure (i i		Choke Size			
I. OPERATOR CERTIFIC	CATE OF C	COMPL	LANCE		31						
I hereby certify that the rules and regulation	lations of the Oi	Concerne			OIL	-CÓNS	SERVA		IVISIO	N	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.											
$\Delta \leq$	e_{1}		-ma	1215年	Uale Ar	proved					
Signature		GWEN				By ORIGINAL SIGNED BY					
Gary S. Barker Operations Mgr. Prioled Name					WIKE WILLIAMS						
<u>9-22-90 (915)683-3171</u>					Title						
		Telepho	ne No			•	· · •	,	€". 5 ° 5 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9		
INSTRUCTIONS, This for											

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

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance 2) All sections of this form must be filled out for allowable on new and recompleted wells.
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.