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TRANSPORTER  
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GAS  
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PRODUCTION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-1  
Effective 1-1-65

RECEIVED BY  
JAN -8 1987  
O. C. D.  
ARTESIA, OFFICE

Robert N. Enfield  
Address  
P. O. Box 2431, Santa Fe, New Mexico 87504-2431  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☒  
Recompletion ☒ Casinghead Gas ☐ Condensate ☐  
Change in Ownership ☐

If change of ownership give name and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

Lease Name Federal 18	Well No. 1	Pool Name, including Formation McMillan Upper Penn Gas	Kind of Lease State, Federal or Fee Federal	Lease No. NMA-32594
Location Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>18</u> Township <u>19 South</u> Range <u>27 East</u> , NMPM, <u>Eddy</u> County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Co	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 175, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Enron Gas Marketing	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1188, Houston, TX 77251-1188	
If well produces oil or liquids, give location of tanks. Unit <u>J</u> Sec. <u>12</u> Twp. <u>19S</u> Rge. <u>26E</u>	Is gas actually connected? <u>No</u>	When <u>1-9-87</u> <u>Approx 1/20/87</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input checked="" type="checkbox"/>	Same Res'v. <input type="checkbox"/>	Diff. Res'v. <input checked="" type="checkbox"/>
Date Spudded 4-18-82	Date Compl. Ready to Prod. 12/24/86		Total Depth 10,025'			P.B.T.D. 9613' KB		
Elevations (DF, RAB, RT, GR, etc.) 3289 KB	Name of Producing Formation Cisco Canyon		Top Oil/Gas Pay 7906'			Tubing Depth 8017'		
Perforations 8 shots from 7906' - 7908'						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	13-3/8"	300'	300 sx C1 C
11"	8-5/8"	2200'	850 sx Halliburton Light
7-7/8"	5-1/2"	9982'	850 sx C1 H

IV. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.) <u>Post TD-2</u> <u>1-16-87</u> <u>comp. Perm</u>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 1 MCF/D	Length of Test 1 hr.	Bbls. Condensate/MMCF 25	Gravity of Condensate Unknown
Testing Method (pilot, back pr.) Multi-Point Back Pressure	Tubing Pressure (Shut-in) 2360	Casing Pressure (Shut-in) Packer	Choke Size 14/64"

V. 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.

Robert N. Enfield  
(Signature)  
Robert N. Enfield  
(Title)  
1/6/87  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED JAN 26 1987, 19\_\_\_\_  
BY Original Signed By  
Leslie A. Clements  
TITLE Supervisor District II

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.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.