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NEW MEXICO OIL CONSERVATION COMMISSION

RECEIVED REQUEST FOR ALLOWABLE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JUL 19 1985

O. C. D.

ARTESIA, TEXAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator Robert N. Enfield ✓	
Address P. O. Box 2431, Santa Fe, New Mexico 87501	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner \_\_\_\_\_

#### I. DESCRIPTION OF WELL AND LEASE

Lease Name Douglas	Lease No.	Well No. 1	Requesting Form <del>Undesignated Cisco Canyon</del> <b>WYOMING GAS</b>	Kind of Lease State, Federal or Fee <b>FEE</b>
Location Unit Letter <b>J</b> ; <b>1700</b> Feet From The <b>South</b> Line and <b>1650</b> Feet From The <b>East</b> Line of Section <b>7</b> Township <b>19 South</b> Range <b>27 East</b> , <b>NMPM</b> , <b>Eddy</b> 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 checked="" type="checkbox"/> Natural Gas Pipeline Co. of America	Address (Give address to which approved copy of this form is to be sent) P. O. Box 283, Houston, TX 77001			
If well produces oil or liquids, give location of tanks.	Unit <b>J</b>	Sec. <b>12</b>	Twp. <b>19S</b>	Rge. <b>26E</b>
Is gas actually connected?		When <b>8-7-85</b> <del>Approx 8/6/85</del>		

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'v.	Diff. Rest'v.
			<b>X</b>				<b>X</b>		<b>X</b>
Date Spudded <b>12/17/82</b>	Date Compl. Ready to Prod. <b>12/9/84</b>		Total Depth <b>10,070'</b>		P.B.T.D. <b>9540'</b>				
Elevations (DF, RKB, RT, GR, etc.) <b>3270.8</b>	Name of Producing Formation <b>Cisco Canyon</b>		Top Oil/Gas Pay <b>7857'</b>		Tubing Depth <b>7809'</b>				
Perforations <b>7857' - 7864' 2 shots/ft. (16 holes)</b>		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
<b>17-1/2"</b>	<b>13-3/8"</b>		<b>300'</b>		<b>300 sx C1 C</b>				
<b>11"</b>	<b>8-5/8"</b>		<b>2200'</b>		<b>850 sx Howco Light</b>				
<b>7-7/8"</b>	<b>5-1/2"</b>		<b>10070'</b>		<b>950 sx C1 H</b>				
	<b>2-3/8"</b>		<b>7864'</b>						

#### 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)

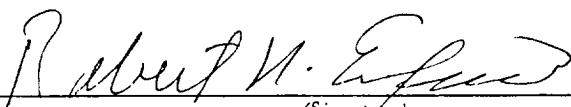
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

#### GAS WELL

Actual Prod. Test-MCF/D <b>3419</b>	Length of Test <b>1 hr.</b>	Bbls. Condensate/MMCF <b>35</b>	Gravity of Condensate <b>59</b>
Testing Method (pitot, back pr.) <b>Multi-Point Back Pressure</b>	Tubing Pressure <b>1785</b>	Casing Pressure <b>Packer</b>	Choke Size <b>23/64"</b>

#### 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.

  
(Signature)  
Robert N. Enfield - Operator  
(Title)  
7/18/85  
(Date)

#### OIL CONSERVATION COMMISSION

APPROVED **AUG 16 1985**, 19\_\_\_\_\_  
BY **Original Signed By**  
**Mike Williams**  
TITLE **Oil & Gas Inspector**

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.