UNGY AND MIDLINALS DEPARTMENT			form C-104 Revised 10-1-78
ENELO IN ALL ION	P. O. BOX 2008 EANTA FE		RECOVED
			050 1 7 1981
TRANSPORTER DIL /	AND ANTIPAL CAS		
PRONATION OFFICE			
Tenneco Oil Co	mpany 🗸		
6800 Park Ten		78213 Other (Please explain)	
New Well	Change in Transporter of:		
Recompletion Change in Ownership		Ensole State FP 13	
If change of ownership give nam and address of previous owner			
DESCRIPTION OF WELL AN	D LEASE		
Catclaw Draw Unit Com	Well No. Pool Name, Including 1 16 Catclaw Draw 1		eral or Fee State K4902
Unit Letter	990 Feel From The West Li	ne and 2310 Feet Fro	m The North
Line of Section 13	Township 21S Range		dy County
	ORTER OF OIL AND NATURAL G.		
Neme of Authorized Transporter of	Cil _ cr Condensate _	Address (Give address io which ap)	proved copy of this form is to be sent)
Reme of Authorized Transporter of Gas Company of N		Address (Give address to which op; First International	Bldg, Dallas, TX. 75201
11 well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Fige.	is gas actually connected? Yes	^{when} 10/29/81
If this production is commingled COMPLETION DATA	with that from any other lease or pool,		
Designate Type of Comple	etion – (X)	New Well Workover Deepen	Plug Bock Same Res'v. Diff. Res'
Date Spudaed	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc	.; Mame of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
		D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	ster recovery of total volume of load a	il and must be equal to or exceed top allo
OIL WELL Dute First New Cil Run To Tonks		epik or be for full 24 hours) Producing Method (Flow, pump, gas	
Length of Test	Tubing Presewe	Casing Pressure	Choxe Size
Actual Prod. During Test	Oil-Bbis,	Water - Bbis.	Gas-MCF Part Contract
Actual Proc. During Test			A AN A
GAS WELL			((the second s
Actual Frod. Tool-MCF/D	Longth of Tost	Bbls. Condensate/MMCF	Grovity of Condensate
Testing Method (pitor, back pr.)	Tubing Pressure (shut-in)	Cosing Pressure (Shut-in)	Choke Size
I. CERTIFICATE OF COMPLIANCE		DIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oli Conservation Division have been complied with and that the information given above is true and complete to the beat of my knowledge and belief.		APPROVED DEC 3	0.1997
		BYSUPERVISOR, DISTRICT A	
		TITLE	
Anita Draw		This form is to be filed in compliance with HULE 1104. If this is a request for sliowable for a newly drilled or despens well, this form must be accompanied by a tabulation of the deviation	
Production Analyst		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow able on new and recompleted wells. Fill out only Sections 1, 11, 111, and VI for changes of owner	
(Tule) December 14, 1981			
	(Date)	well name or number, or transp	otter, or other such change of conditio ust he filed for each pool in multip