

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

JUL 20 '90

ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Pogo Producing Company	Well API No.
Address P. O. Box 10340 Midland TX 79702-7340	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name  
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name NEL COM	Well No. 1	Pool Name, Including Formation Morrow Undesignated	Kind of Lease State, Federal or Fee	Lease No. NM-15433
Location Unit Letter I : 660 Feet From The East Line and 1980 Feet From The South Line Section 9 Township 23-S Range 28-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Enron Oil Trading	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188, Houston, TX 77251-1188
Name of Authorized Transporter of Casinghead Gas or Dry Gas Llano, Inc.	Address (Give address to which approved copy of this form is to be sent) 921 Sanger, Hobbs NM 88240-4917
El Paso Natural Gas	P.O. Box 1492, El Paso TX 79978
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When ? I   9   23S   28E   Yes   Llano 9/04/81 El Paso 10/15/81

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		XX		XX	XX			XX
Date Spudded 11/12/80	Date Compl. Ready to Prod. Recom. 7/19/90	Total Depth 12,852	P.B.T.D. 12,640 CIBP					
Elevations (DF, RKB, RT, GR, etc.) 3046.4 GR; 3068 RKB	Name of Producing Formation Morrow	Top Oil/Gas Pay Gas Pay - 11,585	Tubing Depth 12,229					
Perforations 12,314-12,323 - 19 holes			Depth Casing Shoe 12,852					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
20"	16"	442	510					
12-1/4"	10-3/4"	2,700	1,700					
9-1/2"	7-5/8"	10,220	2,220					
6-1/2"	5" liner	9,927 - 12,852	400					

V. 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 Tank	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 657 - 1173	Length of Test 4 Hrs.	Bbls. Condensate/MMCF 0	Gravity of Condensate 0
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 22 hr 4104 psi D.W.T.	Casing Pressure (Shut-in) Packer	Choke Size 3/64 - 7/64

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation  
Division have been complied with and that the information given above  
is true and complete to the best of my knowledge and belief.

Signature R. L. Wright	Dist. Drlg. & Prod. Supt.
Printed Name 7/19/90	Title 915/682-6822
Date	Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 14 1990

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: 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 with Rule 111.
- 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.