NU. DE LUBIEN BELEIVED			
DISTRIBUTION SANTA FE NEW MEXICO O	IL CONSERVATION MMISSION	_	
	EST FOR ALLOWABLE	 Form C-104 Supersedes Old C-104 and C 	
U.S.G.S.	AND	Ellocitve 1-1-65	
	TRANSPORT OIL AND NATUR	AL GAS	
TRANSPORTER	RECEIVED BY	I	
	FED 1 9 1007		
PROPATION OFFICE	FEB 1 2 1987		
Operator /			
Enron Oil & Gas Company	ARTESIA, OFFICE		
P. O. Box 2267, Midland, Texas 79702			
Reason(s) for Hing (Check proper box)			
New We!1 Change in Transporter of:	Other (Please explain)		
Recompletion Oil	Gas X Change Open	· · ·	
Change in Ownership X	y Gas X Change Opera	ator Name	
If change of ownership give name uncourt commune			
and address of previous owner HNG OIL COMPANY, P. O	. Box 2267, Midland, Tex	kas 79702	
II. DESCRIPTION OF WELL AND LEASE	· · ·		
Well No.: Pool Name Including		· · · · · · · · · · · · · · · · · · ·	
Queen Lake 19 Federal 1 Wildcat Atol		Lease No.	
		Merei of Fee Federal NM17224	
Unit Letter <u>G</u> : <u>1950</u> Feet From The <u>north</u>	Line and 1980	om Theeast	
Line of Section 19 Townshi 24S			
Line of Section 19 Township 24S Range	29Е , ММРМ,	Eddy County	
I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	G46		
or Condensate	Address (Give address to which an	proved copy of this form is to be sent)	
The Permian Corporation	P 0 Box 1192 H-	proved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas i or Dry Gas X	P. O. Box 1183, Hous Address (Give address to which ap	ton, Texas 77001 proved copy of this form is to be sent;	
United Gas Pipeline Company	P. O. Box 1478 Hours		
If well produces oil or liquids, Unit Sec. Twp. Rge. give location of tarks.	Is gas actually connected?	When	
If this production is completely in a	Yes	7/25/83	
If this production is commingled with that from any other lease or pool. COMPLETION DATA	l, give commingling order number:	,	
Designate Type of Completion - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv	
		i ing back same res.v. Diti. Hesty	
Date Spudded Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			
	Top Oll/Gas Pay	Tubing Depth	
Perforations		Death Carlo B	
••		Depth Casing Shoe	
TUBING, CASING, AN	ID CEMENTING RECORD		
HOLE SIZE CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		Past ID-3	
		3-22-82	
		- che ap.	
TEST DATA AND REQUEST FOR ALLOWABLE (Test must be a	after recovery of total values of total	- chg GT Lbl	
OIL WELL able for this d	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	l and must be equal to or exceed top allou	
Date First New Oil Run To Tanks Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
Length of Test Tubing Pressure	Casing Pressure		
	Contro Flessure	Choke Size	
Actual Prod. During Test Oil-Bbis.	Water-Bble.	Gas-MCF	
GAS WELL			
Adval Devid The second s	·		
Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)			
	Casing Pressure (Shut-in)	Choke Size	
CERTIFICATE OF COMPLIANCE			
	UIL CONSERVA	TION COMMISSION	
• •	14	APPROVED MAR 2 3 1987 19	
I hereby certify that the rules end regulations of the Oil Conservation Commission have been complied with and that the information rules	APPROVED MAR 2		
I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.	APPROVED MAR 2	nol Signed By	
Winnission neve been complied with and that the information of	APPROVED MAR 2 BY Origi	nal Signed By A. Clement	
above is true and complete to the best of my knowledge and belief.	APPROVED MAR 2	nal Signed By A. Clement	
above is true and complete to the best of my knowledge and belief.	APPROVED MAR 2 BY Origi TITLE Super	nol Signed By A. Clements Vicer District II	
Beltty Signature)	APPROVED MAR 2 BY Origi TITLE Super This form is to be filed in a If this is a request for allow	A Clements Wiser District II compliance with RULE 1104.	
Beltty Signature)	APPROVED MAR 2 BY Origi BY Les TITLE Super This form is to be filed in o If this is a request for show well, this form must be second	nol Signed By <u>A. Clements</u> <u>vicer District II</u> compliance with RULE 1104. reble for a nawly drilled or deepent. nied by a tabulation of the deepent.	
Better Selder	APPROVED MAR 2 BY Origi BY Les TITLE Super This form is to be filed in a If this is a request for allow well, this form must be sccompa tests taken on the well in accor All sections of this form mu	noi Signed By <u>A. Clements</u> <u>wicer District II</u> compliance with RULE 1104. rable for a nawly drilled or despen- nied by a tabulation of the deviation dance with RULE 111. at be filled out completely for atlon	
Betty Gildon, Regulatory Analyst 2/10/87	APPROVED MAR 2 BY Origi BY Les TITLE Super This form is to be filed in a If this is a request for allow well, this form must be accompa tests taken on the well in accor All sections of this form mu sble on new and recompleted we	A. Clements Vicor District II compliance with RULE 1104. rable for a newly drilled or deepene- nied by a tabulation of the deviation dance with RULE 111. at be filled out completely for ellow- its.	
Betty Gildon, Regulatory Analyst	APPROVED MAR 2 BY Origi BY Les TITLE Super This form is to be filed in a If this is a request for allow well, this form must be sccompa tests taken on the well in accor All sections of this form mu able on new and recompleted we Fill out only Sections I, II well name or number, or transport	noi Signed By <u>A. Clements</u> <u>wicer District II</u> compliance with RULE 1104. rable for a nawly drilled or despen- nied by a tabulation of the deviation dance with RULE 111. at be filled out completely for atlon	