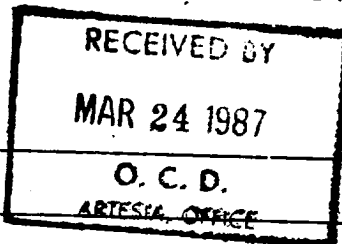


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PRORATION OFFICE	<input type="checkbox"/>

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

Form C-104  
Supersedes C-104  
Effective 1-1-87



I. OPERATOR  
Enron Oil & Gas Company ✓  
Address  
P. O. Box 2267, Midland, Texas 79702  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐  
Other (Please explain)  
Change Operator Name  
If change of ownership give name and address of previous owner Belco Development Corp., Box 2267, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name James Ranch Unit	Well No. 14	Pool Name, including Formation Los Medanos Morrow	Kind of Lease State, Federal or Fee
Location Surface <sup>N 100</sup> Unit Letter <del>BHL</del> : <del>2</del> : 737	Feet From The South	Line and 2039	Feet From The West
Line of Section 16	Township 23S	Range 31E	NMPM, Eddy

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Enron Oil Trading & Transp. Co. Effective 4-1-94	Address (Give address to which approved copy of this form is to be sent) Box 20108, Shreveport, LA 71120
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) Box 293, Houston, Texas 77001
If well produces oil or liquids, give location of tanks. Unit N Sec. 6 Twp. 23 Rge. 31	Is gas actually connected? When Yes

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 Hole
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
Perforations						Depth Casing Shoe	
TUBING, CASING, AND CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT				
			Post In				
			3-27-87				
			shg. 2.1.11				

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 greater than the 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. 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.

Betty Gildon  
(Signature)  
Betty Gildon, Regulatory Analyst  
(Title)  
3/9/87  
(Date)

OIL CONSERVATION COMMISSION

APPROVED  
Original Signed By  
BY Mike Williams  
Oil & Gas Inspector  
TITLE

This form is to be filed in compliance with RULE 11.

If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes in well name or number, or transporter, or other such change.

Separate Forms C-104 must be filed for each pool.