DISTRIBUTION ANTA FE	REQUE:	CONSERVATION COA SION ST FOR ALLOWABLE AND RANSPORT OIL AND NATURAL	Form C-104 Supprovides Old C-104 and C- Effective 1-1-05
TRANSPORTER OIL	7		FEB 02 '89
OPERATOR / PRORATION OFFICE Operator	∃		OL CL D. ARTESSA, OFFICE
Quinoco Petroleum,	Inc.		
Address Stnaford Place 3, 4 Reeson(s) for filing (Check proper	582 South Ulster St Parkv		0 80237
New Well	Change in Transporter of:	Other (Please explain) EFFECTIVE	1/1/89
Recompletion Change in Ownership X	Oil Dry Casinghead Gas Con	Gas	
If change of ownership give name		densate	·
and address of previous owner	Enron Uil & Gas Co	npany, Box 2267, Midland	, Texas 79702
Lease Name	Well No. Pool Name, Including	Formation Kind of Lea	35€
Salt Draw 2 Com.	1 Salt Draw A	toka State, Fede	ral or Fee Fee -
Unit LetterE;	1980 Feet From The north	ine and <u>660</u> Feet From	west
Line of Section 2	<u>Fownship 25S Range</u>	28Е , ммрм,	Eddy County
DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL G	AS	
L Enron Oil Trading &	Transp., Inc.	Address (Give address to which appr Box 20108, Shreveport	oved copy of this form is to be sent)
Name of Authorized Transporter of (Casinghead Gas 📄 or Dry Gas 🗶	Address (Give address to which appr	oved copy of this form is to be sent)
Llano, Inc. If well produces oil or liquids,	Unit Sec. Twp. Ege.	Box 1320, Hobbs, NM 88	3240
give location of tanks.	E 2 25 28	Yes	2/11/86
If this production is commingled v COMPLETION DATA	with that from any other lease or pool	, give commingling order number:	
Designate Type of Complet	ion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
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 AN	D CEMENTING RECORD	
HOLESIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST H	FOR ALLOWABLE (Test must be a	Iter recovery of total uniume of load oil	and must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas li	
f an all of The al			
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbis.	Water - Bbls.	Gas - MCF
		1	POST ID-3
GAS WELL Actual Prod. Test-MCF/D	Length of Test		Ghand
		Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-im)	Choke Size
CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED FEB 1 3 1989 19	
Della Rechardson		This form is to be filed in compliance with RULE 1104.	
folly Richardson (Signature)		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	
Production Technician (Tule)		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-	
/23/89		able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner	
(Date)		well name or number, or transporter, or other such changes of owner, Canada Earne C-104 must be filed for each pool in multiply	