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

Form C-104  
Supersedes Old C-104 and C-11  
Effective 1-1-65

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NOV 17 '87

O. C. D.

ARTESIA OFFICE

Operator Enron Oil & Gas Company	
Address P. O. Box 2267, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Other (Please explain)	

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name HNG 35 Federal	Well No. 1	Pool Name, Including Formation Wildcat Cherry Canyon	Kind of Lease State, Federal or Fee Federal	Lease No. NM 26870
Location				
Unit Letter P	660	Feet From The south	Line and 660	Feet From The east
Line of Section 35	Township 25S	Range 26E	NMPM,	Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading & Transp. Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 20108, Shreveport, LA 71120					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 35	Twp. 25S	Rge. 26E	Is gas actually connected? No	When

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input checked="" type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Restv. <input type="checkbox"/>	Diff. Restv. <input checked="" type="checkbox"/>
Date Spudded Re-entered P&A 11/23/85	Date Compl. Ready to Prod. 9/27/87		Total Depth 5800'		P.B.T.D. 5355'			
Elevations (DF, RKB, RT, GR, etc.) 3324' GR	Name of Producing Formation Cherry Canyon		Top Oil/Gas Pay 4758'		Tubing Depth 4997'			
Perforations 4758 - 4973					Depth Casing Shoe			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
14-3/8	10-3/4		250'		83			
7-7/8	5-1/2		5800'		800			
	2-3/8		4997'					

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 Tanks 11/2/87	Date of Test 11/10/87	Producing Method (Flow, pump, gas lift, etc.) Pumping (tubing-type 2x1-3/4x24)	
Length of Test 24 hours	Tubing Pressure 30	Casing Pressure 30	Choke Size -
Actual Prod. During Test	Oil - Bbls. 78	Water - Bbls. 5	Gas - MCF 250

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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)  
November 16, 1987  
(Date)

OIL CONSERVATION COMMISSION

APPROVED NOV 30 1987, 19\_\_\_\_  
BY Original Signed By  
Mike Willett  
TITLE Oil & Gas Inspector

This form is to be filed in compliance with RULE 1104.  
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 tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply