	-	1	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.		1	
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			
C			

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C

	FILE		AND	Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL	GAS .
	LAND OFFICE			
	TRANSPORTER GAS			
	OPERATOR			
	PRORATION OFFICE			
••	Operator			
	E P Operating Co	mpany (303)	831-1616	
	Address	Suite 2000 Denue Ce	11- 00003	
	Reason(s) for filing (Check proper box)	, Suite 3600, Denver, Co		
	New Well	Change in Transporter of:	Other (Please explain)	
	Recompletion	Oil Dry Go	,,	
	Change in Ownership XX (Name On		Ħ l	
	If change of ownership give name and address of previous owner	Enserch Exploration, Inc	c., 1700 Lincoln St., St	e 3600, Denver, CO 802
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation Kind of Leas	
	Federal 3/	1 Ute Dome (Pe		20030 110
	Location			1111 0 2 2 0
	Unit Letter F ; 181	O Feet From The North Lin	se and 2340 Feet From	_{The} East
		_		
	Line of Section 31 Tow	nship 32N Range	13W , _{ммрм} , Sa	n Juan County
	DECLOS ATTOM OF TO ANCHORE	TER OF OUT AND NATIONAL CA		
111.	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil		Address (Give address to which appro	ved copy of this form is to be sent!
				,, , ,
	Name of Authorized Transporter of Cast	inghead Gas or Dry Gas	Address (Give address to which appro	ved copy of this form is to be sent)
	If well produces oil or liquids,	Unit Sec. Twp. Pge.	Is gas actually connected? Wh	en
	give location of tanks.			
***	If this production is commingled with	n that from any other lease or pool,	give commingling order number:	
1 V .	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Fiesty, Diff. Res
	Designate Type of Completion	n – (X)		
	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
	Periorations			Septim Gualing Billse
		TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
T ,	TOTAL AND DECLIEST FO	D ALLOWARIE (Tones to the	<u> </u>	
٧.	TEST DATA AND REQUEST FO	able for this de	fier recovery of total volume of load oil pth or be for full (hours)	and must be equal to or exceed top atto
	Date First New Oil Run To Tanks	Date of Test	Producing Made (Foul) ung as di	(i, eic.)
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	Actual Prod. During Test	Oli-Bbia,	Mater-Bale OIL CON DI	Gas-MCF
	Actual Fiba. Builing 1991	- 25. - 2	OIL COM DO	
			DIST	¥.
	GAS WELL		.0,0,. 3	
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back pr.)	Tubing Pressure (Shnt-in)	Cosing Pressure (Shut-in)	Choke Size
				TION COMMISSION
VI.	CERTIFICATE OF COMPLIANC	E.	OIL CONSERVA	TION COMMISSION
	I hereby certify that the rules and re	egulations of the Oil Conservation	APPROVED	2 19
	Commission have been complied wi	ith and that the information given	11 Smark	J. Swa /
	above is true and complete to the	best of my knowledge and belief.	BY	Allocoupon Dia
			TITLE	SUPERVISOR DISTRICT # 3
	$V = d U \cdot .$		This form is to be filed in	compliance with AULE 1104.
	Dannie C. Clagin		If this is a request for silos	able for a newly drilled or deepen
	Danny E. Hagins, Dystri	ev Production Supt.	well, this form must be accompa- tests taken on the well in accor-	nied by a tabulation of the deviati
	New Enserch Exploration	Managing General	I tests taken ou the man th sccor	

(Title)

(Dote)

June 5, 1985

Partner

All sections of this form must be filled out completely for allo able 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 multiple