

DISTRICT REGION
COUNTY
FILE
U.S.G.S.
LAND OFFICE
TRANSPORTER OIL
GAS
OPERATOR
REGISTRATION OFFICE

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

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED BY
MAY 6 1985
O. C. D.
ARTESIA, OFFICE

Operator
HP Operating Company

P.O. Box 4815, Midland, TX 79704

Commingling (Check one)

Change in Transportation of:

Oil

Dry Gas

Gasoline

Crude Oil

For Lease or Research Exploration, Inc., P.O. Box 4815, Midland, TX 79704

LEASE

Well No. "A"

1 Bulls Eye

Section N

30

Foot From the South

and 2310

Range 30

Block 7-S

East 19-E

Section 19-E

Block 19-E

Range 30

Block 19-E

Section 19-E

Block 19-E

REGISTRATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil (X) or Condensate

Address (Give address to which approved copy of this form is to be sent)

Phillips Petroleum Company-Trucks

4001 Penbrook, Odessa, TX 79763

Name of Authorized Transporter of Gasoline or Dry Gas

Address (Give address to which approved copy of this form is to be sent)

None

If well produces oil or liquids,
give location of trucks.

Unit

Sec.

Twp.

Rge.

Is gas actually commingled?

When

N

30

7S

29E

No

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 Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DE, KKB, 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 IP-3 6-14-85 Chg Op

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)

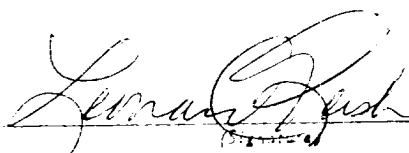
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Test Results	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-30 in.	Gas-30 in.	Choke Size

GAS WELL

Test Results	Date of Test	Producing Method	Quantity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (30 in.-in)	Casing Pressure (30 in.-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.



District Production Manager, New Enserch Exploration, Inc.
Managing General Partner

(Date)

OIL CONSERVATION COMMISSION

JUN 12 1985

APPROVED _____, 19

BY

Original Signed By
Les A. Clements

TITLE

Supervisor District II

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 completed wells.