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ENERGY AND MINERALS DEPARTMENT

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	GAS
OPERATOR	
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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Slash Four Enterprises, Inc.

Address
P.O. Box 1433, Roswell, N.M. 88202

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) CASH ON HAND GAS MUST NOT BE FLARED AFTER 11/28/90 IF GAS IS OBTAINED EX # 2-B32
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	
		<input type="checkbox"/> Dry Gas
		<input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Toltec	Well No. 2	Pool Name, including Formation Diablo, S.A.	Kind of Lease State, Federal or Fee	Fee	Lease No. NA
Location Unit Letter J : 1650 Feet From The South Line and 2310 Feet From The East Line of Section 22 Township 10S Range 27E, NMPM, Chaves County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

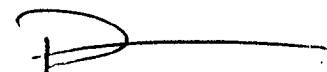
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading & Transportation Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2297, Midland, Tx 79702
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Post ID-2 10-6-90 comp & BK
If well produces oil or liquids, give location of tanks. Unit J Sec. 22 Twp. 10S Rge. 27E	Is gas actually connected? No When

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)
Phelps White, President

9/24/90
(Title)
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 28 1990, 19
BY ORIGINAL SIGNED BY
MIKE WILLIAMS
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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5/24/90	Date Compl. Ready to Prod. 9/21/90		Total Depth 2178			P.B.T.D. 2163			
Elevations (DF, RKB, RT, GR, etc.) 3843 G.L.	Name of Producing Formation San Andres		Top Oil/Gas Pay 2100'			Tubing Depth 2160			
Perforations 2100-2115, 2123-2144						Depth Casing Shoe 2177			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8" 24#	430'	200
8"		1725	
6 1/2"	4 1/2" 11.6#	2177	90

V. TEST DATA AND REQUEST FOR ALLOWABLE (Text 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 9/21/90		Date of Test 9/23/90		Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 "		Tubing Pressure NA		Casing Pressure NA	
Actual Prod. During Test 45		Oil-Bbls. 45		Water-Bbls. 1	
				Choke Size NA	
				Gas-MCF 20 est.	

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