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NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and (AND Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Enron Oil & Gas Company P. O. Box 2267, Midland, Texas 79702 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Change Operator Name Recompletion Dry Gas Change in Ownership X Casinghead Gas If change of ownership give name and address of previous owner ____ Belco Development Corp., Box 2267, Midland, Texas 79702 II. DESCRIPTION OF WELL AND LEASE ALL No. Pool Name, Including Formation Federal 31 Lease No Unknow Flying M San Andres State, Federal or Fee Federal Location MM 11333 Unit Letter South Line of Section 9 33 Range **МРМ** Lea County III. DESIGNATION 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) Mobil Oil Corp. Box 900, Dallas, Texas 75221 Name of Authorized Transporter of Casinghead Gas 📉 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 tanks. Sec. Twp. P.ge. is gas actually connected? When N 31 9 33 No If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Designate Type of Completion - (X) Same Resty, Diff. Resty Date Compl. Ready to Prod. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oll/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE (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) OIL WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure Casing Pressure Choke Size Actual Pred. During Test Oil-Bhls. Water - Bbls. Gas - MCF **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Coming Pressure (Shut-in) Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION I hereby certify that the rules and regulations of the Oil Conservation MAR 3 1 1987 APPROVED_ Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despense (Signotwe) well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. Betty Gildon, Regulatory Analyst (Title)

(Date)

All sections of this form must be filled out completely for ellowable 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

Mar 25 Jay