

DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE

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

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

Operator	EP Operating Company
Address	P.O. Box 4815, Midland, TX 79704
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well ☐	Change in Transporter of:
Recompletion ☐	Oil ☐
Change in Operator ☐	Dry Gas ☐
	Oil and Gas ☐
	Oil and Gas ☐

If change of operator, give name and address of previous owner: Enserch Exploration Inc., P.O. Box 4815, Midland, TX 79704

RESUMPTION OF WELL AND LEASE	Well No., Pool Name, including Formation	Kind of Lease	File No.
Lease Name	State "14"	State, District, and County	100-803
Location	1 West Caprock Morrow		
Unit Letter	H	1980 Feet From The North	Line and 660 Feet From The East
Line of Section	14	Township	12-S
		Range	31-E
		County	Chaves

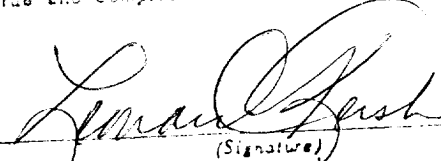
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	Name of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
	Phillips Petroleum Company-Trucks	4001 Penbrook, Odessa, TX 79763
Name of Authorized Transporter of Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
Warren Petroleum Company	P.O. Box 1150, Midland, TX 79702	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	H	14
		12S
		31E
		No

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

V. COMPLETION DATA	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Designate Type of Completion - (X)								
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Elevations (DF, RKB, RT, CR, 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					

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL	(Test must be after recovery of total volume of liquid 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, lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL	Length of Test	Producing Method (Flow, pump, lift, etc.)	Gravity of Condensate
Actual Prod. During Test	Tubing Pressure (inlet-in)	Casing Pressure (inlet-in)	Choke Size
Testing Method (pilot, back pr.)	Tubing Pressure (inlet-in)	Casing Pressure (inlet-in)	Choke Size

VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION COMMISSION
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.	JUN 12 1985
Signature: 	APPROVED BY: ORIGINAL SIGNED BY JERRY SEXTON
District Production Manager, New Enserch Exploration	DISTRICT SUPERVISOR
Managing General Partner	TITLE
(Date)	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.