AU U. COPIES RECE	.,, s		
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE		<u>L_L</u>	
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

NEW MEXICO OIL CONSERVATION COMMISSION REGULEST FOR ALL OWARLE

Form C-104 Supersedes Old C-104 and C-110

SANTA FE	REQUEST F	OR ALLOWABLE	Effective 1-1-65	
FILE	ALITHODIZATION TO TOAS	AND NSPORT OIL AND NATURAL G	245	
U.S.G.S.	AUTHORIZATION TO TRAI	NOFUR FUIL AND NATURAL G		
AND OFFICE	-			
TRANSPORTER GAS	7			
OPERATOR	7			
PROBATION OFFICE				
perator				
EP Operating Company				
Address				
P. O. Box 4815, Midla	nd, Texas 79704			
Reason(s) for filing (Check proper bo		Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion	Oil Dry Gas	一一		
Change in Ownership	Casinghead Gas X Conden	sate		
change of ownership give name				
nd address of previous owner				
			•	
ESCRIPTION OF WELL AND	Well No. Pool Name, Including Fo	ormation Kind of Leas	e Lease No	
ease Name	1 Tres Papalotes	C1 = 1 = C = 2 = -	ol or Fee State K-5450	
N. M. (87) State	1 TICS Taparoces			
т 1	874 Feet From The West Line	e and 2086 Feet From	The South	
Unit Letter K; 1	Feet From The			
Line of Section 33 T	ownship 14-S Range 34	-E , NMPM,	Lea County	
Line of Section 33				
FSIGNATION OF TRANSPO	RTER OF OIL AND NATURAL GA	S		
Name of Authorized Transporter of C	or Condensate	Address force against to miner appro-		
Amoco Pineline Compan	1V	3411 Knoxville Ave., L Address (Give address to which appro	ubbock, TX 79401	
Name of Authorized Transporter of C	Casinghead Gas 📉 💮 or Dry Gas 🦳	1		
J. L. Davis		Denton Gas Plant, 211 N.	Colorado, Midland, TX 79	
If well produces oil or liquids,	Unit Sec. Twp. P.ge.	Is gas actually connected? Wh	nen	
give location of tanks.	B 33 148 34E	Yes	2/1/71	
t wis is semminated:	with that from any other lease or pool,	give commingling order number:	,	
COMPLETION DATA			Plug Back Same Res'v. Diff. Res	
	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Res	
Designate Type of Comple	tion – (A)			
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
_			Tubing Depth	
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
			Depth Casing Shoe	
Perforations				
		D CEVENTING BECORD		
		DEPTH SET	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	02.11, 02.		
			_	
	The state of the s	after recovery of total volume of load of	l and must be equal to or exceed top al	
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a able for this di	epth or be for full 24 hours)		
OII. WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)	
Date First New Oil Run 10 Idinas		į		
	Tubing Pressure	Casing Pressure	Choke Size	
Length of Test			·	
Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF	
Actual Prod. During 1981	5 5 -13-1			
CAC WEST				
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
Methor Line: Leat-Mot Vp				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
1 88 ting Method (Prince)				
	ANGE	OIL CONSERV	ATION COMMISSION	
CERTIFICATE OF COMPLIA	ANCE	11		
		APPROVED APR 2	<u> </u>	
	nd regulations of the Oil Conservation of with and that the information given			
Commission have been complied above is true and complete to	the best of my knowledge and belief.	OKIORANE SIGNA		
•		DISTRICT I	SUPERVISOR	
1		TITLE		
		This form is to be filed in	This form is to be filed in compliance with RULE 1104.	
~ 1.1	8	If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat		
(!	Signature) S. D. Reed	il tasts taken on the well in acc	COLGENCE MILL MARKE IIII	
Production Superinte				
Froduction paperince	endent	- All sections of this form	must be filled out completely for a	
April 17, 1986	endent (Title)	All sections of this form	must be filled out completely for a	

(Date)

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.

App Roman