

DISTRICT			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRODUCTION OFFICE			

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

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

I. Operator
EP Operating Company
Address
P.O. Box 4815, Midland, TX 79704
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Production ☐ Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Gas ☐
Other (Please explain)
Date of ownership give name
Enserch Exploration, Inc. P.O. Box 4815, Midland, TX 79704

DESCRIPTION OF WELL AND LEASE
Well Name
Well No. 7 Pool Name, Including Formation South Peterson Penn
Kind of Lease State, Federal or Fee Fee
Lease No.
Birth
Section 30 Township 5-S Range 33-E NE/4 Roosevelt County
Feet From The East Line and 510 Feet From The South

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Phillips Petroleum Company-Trucks
Address (Give address to which approved copy of this form is to be sent)
4001 Penbrook, Odessa, TX 79763
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Citites Service Company
Address (Give address to which approved copy of this form is to be sent)
Bluitt Gasoline Plant, Milnesand, NM 88125
If well produces oil or liquids, give location of tanks.
Unit K Sec. 31 Twp. 5S Rge. 33E
Is gas actually connected? Yes When 6/16/79

If this production is commingled with that from any other lease or pool, give commingling order number: PC 573

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv.
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, 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			

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)

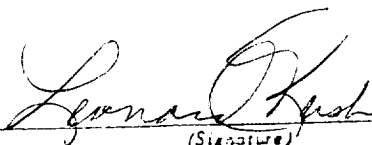
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	During Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Oil - Bbls./MCF	Gravity of Gas
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-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.


(Signature)

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

(Date)

OIL CONSERVATION COMMISSION

JUN 12 1985

APPROVED _____, 1985

BY _____ ORIGINAL SIGNED BY JERRY SEXTON

TITLE _____ DISTRICT I SUPERVISOR

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.