HO OF COMINER MEC	٠,. ب	1	
DISTRIBUTIO	1		
SANTA FE			
FILE		<u> </u>	
U.S.G.S.			
LAND OFFICE	1		
TRANSPORTER	OIL		
	GAS		
OPERATOR			

(Date)

	SANTA FE FILE U.S.G.S.				NEW MEXICO OIL	CONSERVATION COMMIS., IN T FOR ALLOWABLE AND			Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65	
					REGUES			Su Ef		
			AUTHORIZAT		RIZATION TO TE	TION TO TRANSPORT OIL AND NATURAL (				
	LAND OFFICE					CANOL OICE O	IL AND NATURAL	GAS		
	TRANSPORTER	OIL								
		GAS								
	OPERATOR									
I.	PRORATION OFF	ICE								
	Operator									· · · · · · · · · · · · · · · · · · ·
ENSERCH EXPLORATION, INC.										
		D = 403		4. 17 1 -						
	Reason(s) for filing (	Check proper	t box	<u>lidland, l</u>	[exas 7970]	To	(0)			
	New Well	IXT	., 002)	Change In	Transporter of	01	ner (Please explain)			
	Recompletion	Ħ		Oil		as [				
	Change in Ownership				Oil Dry Gas Casinghead Gas Condensate					
					2 040 00///	enadie L		·		
	If change of ownersh									
	and address of previ	lous owner			.1.		^	·	^	
II.	DESCRIPTION OF	F WELL A	ND I	FASE	Theld	ent	north le	Tous	Penn R.C	1112
	Lease Name	- WEED 1	AND L		Pool Name, Including I	Formation	Kind of Lea	se se	Idna 1-6	0 400
	Amoco State	<u>)</u>		1 1	North Peters	on Penn	State, Feder	al of Fee	1_	4401
	Location					011 7 01111				4401
	Unit Letter L		198	O Feet From	n The South Li	ine and 660	) · Feet From	The We	s+	
		······································		1 cct 1 to	. Tile	ine and	r eet r rom	The		
	Line of Section	16	Town	aship 45	Range	33E	, NMPM, ROOSE	evelt.		County
										County
III.	II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS									
	Name of Authorized T		•		ndensate 🗀		e address to which appro			nt)
	Phillips Pe			• •		4001 Per	ıbrook, Odessa,	, Texas 7	red copy of this form is to be sent)	
	Name of Authorized T	ransporter (	of Casi	nghead Gas 📆	or Dry Gas	i i				
						Bluitt	: Gasoline Plar	nt, Milne	sand, N.M.	88125
	If well produces oil of		1	Unit Sec.	Twp.   Pge.   4S   33E		y connected? W	hen		
	give location of tanks	3.		L ¦ 16	No_	<u> </u>				
	If this production is	commingle	d with	that from any	other lease or pool,	give comming	ling order number:			
	COMPLETION DA							·		
	Designate Type	e of Comp	letion		l Well Gas Well	1	Workover Deepen	Plug Back	Same Restv. Diff	f. Restv.
		or comp			X	X			1 1	
	Date Spudded			Date Compl. Re	•	Total Depth		P.B.T.D.		
	4-16-80				-4-80		770'		8340'	
	Elevations (DF, RKB,		c.j	Name of Produc	•	Top Oll/Gas	•	Tubing Dep		
	4387.7' GR Penn				<u> </u>	7862'		7776'		
	Perforations 700C   27   /10   -1 \						Depth Casir		ľ	
	7826'-37' (12 holes)						8764'			
					JBING, CASING, AN	1		· 1 · · · · · · · · · · · · · · · · · ·		
	HOLE S	175			& TUBING SIZE	<del></del>	EPTH SET		CKS CEMENT	
				13-3			29 '		) sx. (Circ.	-)
	12-½" 8-3/4"			9-5/3	8"		35 '		O sx.	
	0-3/4			2-3/8			64' 76'		) sx.	
<b>4</b>	MEGA DAMA AND	DEONES	T FOI					<u> </u>		
	TEST DATA AND OIL WELL	REQUES	L FUI	K ALLUWAB		ifter recovery of epthyor be for ful	total volume of load ail l 24 hours)	and must be eq	qual to or exceed to	op allow-
Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)									*	<del></del>
l	6-4-80		.	6-6-80		Flow				i
Ì	Length of Test		7	Tubing Pressure	,	Casing Pressu	ne 1118	Choke Size		
1	24 hours	5		150 psi	X	Pack	er	20/64	<b>!</b> "	
ľ	Actual Prod. During T	est		Oil-Bbls.		Water-Bbls.		Gas-MCF		
			[	172.50		2		220		
	GAS WELL									
- 1	Actual Prod. Test-MCF/D Length of Test					Bbie. Condens	ate/MMCF	Gravity of Condensate		
Ĺ				,				<u> </u>		
	Testing Method (pitot,	back pr.)	T	ubing Pressure	(Shut-in)	Casing Pressu	re (Shut-in)	Choke Size		
L						<u> </u>		<u> </u>		
VI.	ERTIFICATE OF COMPLIANCE			OIL CONSERVATION COMMISSION						
	hereby certify that the rules and regulations of the Oil Conservation			OIL CONSERVATION COMMISSION  APPROVED						
Commission have been complied with and that the information give above is true and complete to the best of my knowledge and belief					Orig. Signed by					
					,		John Runyan			
					TITLE	Geo	ologist			
	W. Fl. Beene C. H.F. Burnett				This fo	orm is to be filed in o	compliance w	ith 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 MULE 111.  All sections of this form must be filled out completely for allow-					
	(Signature)									
_	Production Superintendent									
_	(Title) abi						able on new and recompleted wells.			
	June 10, 198	<b>,</b> 1980				Fill out only Sections I, II, III, and VI for changes of owner,				

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.