A. UP COMIES RECI		i	
DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE		<u> </u>	
TRANSPORTER	OIL	<u> </u>	
	GAS		
OPERATOR		L_	
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## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

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

1.	U.S.G.S.  LAND OFFICE  IRANSPORTER OIL  GAS  OPERATOR  PRORATION OFFICE	AUTHORIZATION TO TRAN	NSPORT OIL AND NATURAL	GAS		
	Operator Enserch Exploration, Inc.					
	Address P. O. Box 4815, Midland,	Texas 79704-4815				
	Reason(s) for filing (Check proper box)		Other (Please explain)			
	New Well	Change in Transporter of:  Oil Dry Gas	Gas Connection	on Date		
	Recompletion  Change in Ownership	Oil Dry Gas  Casinghead Gas Condens	77 1			
	If change of ownership give name					
	and address of previous owner  DESCRIPTION OF WELL AND LEA	ASF				
11.	Lease Name	Well No. Pool Name, including to		se Lease No.		
	Annie Harvey	1 Undesignated (	i citity others			
	Location J 1980 Unit Letter;	Feet From The South Line	e and Feet From	The		
	Line of Section 6 Townsh	ip 5S Range	33E , NMPM, ROO	osevelt County		
111	DESIGNATION OF TRANSPORTER	OF OIL AND NATURAL GA	S			
	Name of Authorized Transporter of Oil X	or Condensate	Address (Give address to which appr 4001 Penbrook, Odessa			
	Phillips Petroleum Compar	head Gas X or Dry Gas	Address (Give address to which appr	oved copy of this form is to be sent)		
	Transwestern Pipeline Con	npany		Bank Bldg.,Odessa,TX 79761		
	If well produces oil or liquids, give location of tanks.	J 6 5S 33E	Is gas actually connected? W	9/22/81		
	If this production is commingled with the	nat from any other lease or pool,	give commingling order number:			
IV.	COMPLETION DATA	Oll Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.		
	Designate Type of Completion -	ate Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Date Spudded	ite Compi. Reddy to Frod.				
	Elevations (DF, RKB, RT, GR, etc.) No	ame of Producing Formation	Top Oil/Gas Pay	Tubing Depth		
	Perforations		Depth Casing Shoe			
			CEMENTING RECORD	SACKS CEMENT		
	HOLE SIZE	CASING & TUBING SIZE	JOEP IN SET			
v	. TEST DATA AND REQUEST FOR	ALLOWABLE (Test must be a	fter recovery of total volume of load o	il and must be equal to or exceed top allow-		
•	OIL WELL	able for this depth or be for full 24 hours)				
	Date First New Oil Run 10 14.12					
	Length of Test	ubing Presaure	Casing Pressure	Choke Size		
	Actual Prod. During Test O	il-Bbls.	Water-Bbls.	Gas-MCF		
	GAS WELL Actual Prod. Tost-MCF/D L	ength of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.) T	ubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
			OIL CONSERV	VATION COMMISSION		
VI	. CERTIFICATE OF COMPLIANCE		007	2 1981		
	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) H. F. Burnett		Orig. Signed by			
			Jerry Sexton			
			TITLE Dist 1, Supr.			
			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.			
Production Superintendent (Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.				
	October 1, 1981  (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			
i i		completed wells.				