

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

QUENCHHEAD GAS MUST NOT BE
PRODUCED FROM 7/1/81
DATE OF EXPIRATION TO 8/1/81
IN OILFIELD

Operator Enserch Exploration, Inc.	
Address P. O. Box 4815, Midland, Texas 79704	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE			
Lease Name Radcliff	Well No. 1	Pool Name, Including Formation Undesignated (Mississippian)	Kind of Lease State, Federal or Fee Fee
Location Unit Letter L ; 1980 Feet From The South Line and 660 Feet From The West Line of Section 32 Township 4S Range 33E , NMPM, Roosevelt County			

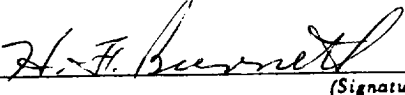
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
Phillips Petroleum Co. - Trucks	4001 Penbrook, Odessa, Texas 79763		
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)		
None			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 32	Twp. 4S
			Rge. 33E
	Is gas actually connected?		When
	No		

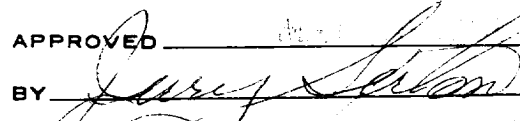
If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>
Date Spudded 2/14/81	Date Compl. Ready to Prod. 5/1/81	Total Depth 8300'	P.B.T.D. 8239'
Elevations (DF, RKB, RT, GR, etc.) 4390' GR	Name of Producing Formation Mississippian	Top Oil/Gas Pay 8173'	Tubing Depth 8177'
Perforations 8173'-8212'			Depth Casing Shoe 8300'
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	357'	460 sx. Circulated
12-1/4"	9-5/8"	2005'	990 sx. Circulated
8-3/4"	5-1/2"	8300'	250 sx.

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 5/1/81	Date of Test 5/6/81	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hours	Tubing Pressure --	Casing Pressure 30#	Choke Size --
Actual Prod. During Test	Oil - Bbls. 20	Water - Bbls. 26	Gas - MCF 20

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.	
	- H.F. Burnett
(Signature)	
Production Superintendent	
(Title)	
May 11, 1981	
(Date)	

OIL CONSERVATION COMMISSION	
APPROVED	19
BY	
TITLE	SUPERVISOR DISTRICT
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.	