

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

Operator Enserch Exploration, Inc.		
Address P. O. Box 4815, Midland, Texas 79704		
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Specify)
New Well <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	GAS PRODUCTION 4/1/82 IN COMPLIANCE WITH RULE 1104
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

THIS WELL WAS PLACED IN THE POOL
OF NORTH PETERSON PENNSYLVANIAN
AND IS NOT BEING PRODUCED

II. DESCRIPTION OF WELL AND LEASE

Lease Name Amoco State	Well No. 4	Pool Name, Including Formation North Peterson Pennsylvanian	Kind of Lease State, Federal or Fee State	Lease No. L-4401
Location Unit Letter 0 ; 660 Feet From The South Line and 2130' Feet From The East Line of Section 16 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) 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) Suite 614, 1st Nat'l Bank Bldg., Odessa, TX 79761					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 16	Twp. 4S	Rge. 33E	Is gas actually connected? No	When

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 9/8/81	Date Compl. Ready to Prod. 1/28/82		Total Depth 8248'		P.B.T.D. 8119'			
Elevations (DF, RKB, RT, GR, etc.) 4369.2' GR	Name of Producing Formation Pennsylvanian		Top Oil/Gas Pay 7692'		Tubing Depth 8096'			
Perforations 7692'-97', 7730'-36', 7850'-68', 8056'-68' (total of 50 holes)					Depth Casing Shoe 8219'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		346'		460 sx. - Circ.			
12-1/4"	9-5/8"		2000'		1190 sx. - Circ.			
8-3/4"	5-1/2"		8219'		460 sx.			
	2-3/8"		8096'					

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)

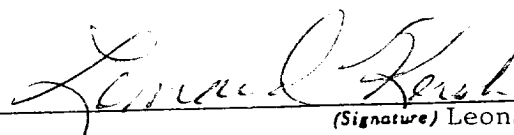
Date First New Oil Run To Tanks 11/2/81	Date of Test 2/3/82	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 Hours	Tubing Pressure --	Casing Pressure 25#	Choke Size --
Actual Prod. During Test	Oil - Bbls. 36	Water - Bbls. 268	Gas - MCF 11

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.


(Signature) Leonard Kersh
District Production Manager
(Title)
February 11, 1982
(Date)

OIL CONSERVATION COMMISSION

APPROVED **FEB 15 1982**, 19____
BY **Orig. Signed**
Jerry Sexton
TITLE **Dist. L. Supv.**

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.