

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)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	<b>CASINGHEAD GAS MUST NOT BE PLACED AFTER 9/11/81 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.</b>
Recompletion <input type="checkbox"/>	
Change in Ownership <input type="checkbox"/>	
Change in Transporter of:	
Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of ownership give name and address of previous owner _____	

DESCRIPTION OF WELL AND LEASE

Lease Name Terry	Well No. 1	Pool Name, including Formation Peterson-Mississippian	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter D	660	Feet From The North	Line and 660	Feet From The West	
Line of Section 5	Township 5S	Range 33E	, NMPM, Roosevelt		County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Phillips Petroleum Company - Trucks	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"/> Transwestern Pipeline Company	Address (Give address to which approved copy of this form is to be sent) Suite 614, First Nat'l Bank Bldg., Odessa, TX 79761					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 5	Twp. 5S	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: \_\_\_\_\_

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 4/23/81	Date Compl. Ready to Prod. 7/11/81		Total Depth 8403'		P.B.T.D. 8342'			
Elevations (DF, RKB, RT, GR, etc.) 4471.3' GR	Name of Producing Formation Mississippian		Top Oil/Gas Pay 8186'		Tubing Depth 8163'			
Perforations 8186'-8231'					Depth Casing Shoe 8403'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		345'		460 sx. - Circulated			
12-1/4"	9-5/8"		1986'		990 sx. - Circulated			
8-3/4"	5-1/2"		8403'		575 sx.			

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)

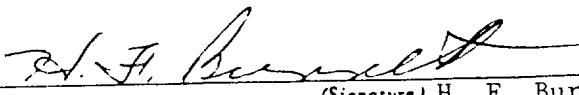
Date First New Oil Run To Tanks 6/27/81	Date of Test 7/21/81	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 Hours	Tubing Pressure --	Casing Pressure 30#	Choke Size --
Actual Prod. During Test	Oil - Bbls. 58	Water - Bbls. 27	Gas - MCF 70

GAS WELL

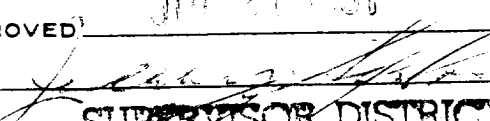
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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) H. F. Burnett  
Production Superintendent  
(Title)  
July 24, 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.