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U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
BROBATION OFFICE			

NEW MEXICO OIL CONSERVATION COM. ION REQUEST FOR ALLOWABLE

Form C-104

	FILE REQUEST FOR ALLOWABLE			Supersedes Old C-104 and C-, Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TE	AND			
	LAND OFFICE	AUTHORIZATION TO TR	GAS			
	OIL		· ·			
	I RANSPORTER GAS	 				
	OPERATOR					
_						
I.	PRORATION OFFICE Operator					
	f	T				
	Enserch Exploration, Inc.					
	P. O. Box 4815, Mid1	and, Texas 79704				
	Reason(s) for filing (Check proper bo)x)	Other (Please explain)			
	New Well	Change in Transporter of:				
	Recompletion X - Dual	Oil Dry C	Gas 🔲	•		
	Change in Ownership	Casinghead Gas Cond	ensate			
	If change of ownership give name					
	and address of previous owner					
m	DESCRIPTION OF WELL AND	TEACE				
••.	Lease Name	Well No. Pool Name, Including	Formation Kind of Leas			
	Collier	1 Peterson Miss		Lease No.		
	Location	1 - 0000000 11200	zoozppian olde, reder	4.0.756		
		00	660	_		
	Unit Letter;;;	80 Feet From The South Li	ine and 660 Feet From	The East		
	Line of Section 29 To	ownship 4S Range	33E , NMPM, Roos	sevelt County		
III.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G.				
	Name of Authorized Transporter of Ci	1 X or Condensate	Address (Give address to which appro	oved copy of this form is to be sent)		
	Phillips Petroleum C	ompany - Trucks	4001 Penbrook, Odessa,	Texas 79763		
	Name of Authorized Transporter of Co	isinghead Gas 📉 💮 or Dry Gas 🦳	Acaress (Give address to which appro	oved copy of this form is to be sent)		
	Transwestern Pipelin	e Company	Suite 614.First Nat'1 B	nk.Bldg.,Odessa,TX 79761		
	If well produces oil or liquids,	Unit Sec. Twp. Ege.		er.		
	give location of tanks.	I 29 4S 33E	Yes	9/24/81		
1						
		ith that from any other lease or pool,	give commingling order number:	DHC-355		
١.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.		
	Designate Type of Completi	op - (X)				
}	Date Spudded	Date Compl. Ready to Prod.	X X X	X		
l				P.B.T.D.		
ļ	6/6/81	6/25/82	8190'	8124*		
	Elevations (DF, RKB, RT, GR, etc., 4351.4° GR	Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth -		
		Mississippian	8074	8122'		
i	Perforations			Depth Casing Shoe		
L	8074'-96' (28 holes)			8190'		
ĺ		TUBING, CASING, AN	D CEMENTING RECORD			
Ī	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
Ī	17-1/2"	13-3/8"	346	460 sx Circ.		
Ī	12-1/4"	9-5/8"	1889'	990 sx Circ.		
- 1	8-3/4"	5-1/2"	8190'	275 sx.		
-		2-3/8"	8122'	2/3 54.		
T	PECT DATA AND DECUEST E					
	FEST DATA AND REQUEST FOIL WELL		ifter recovery of total volume of load oil epth or be for full 24 hours)	and must be equal to or exceed top allow-		
	Date First New Oil Run To Tanks	Date of Test	Freducing Method (Flow, pump, gas li	ft etc.)		
- 1	6/19/82			,,,		
-	Length of Test	6/25/82 Tubing Pressure	Pumping Casing Pressure	Choke Size		
}	- •	Tubing Pressure		Chert Size		
j_	24 Hours	Oil-Bble.	25# Water - Bb\s.			
	Actual Prod. During Test			Gas-MCF		
		6	6	9		
	GAS WELL					
Γ	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Cosing Pressure (Shut-in)	Choke Size		
سا 11 م	CERTIFICATE OF COMPLIANO	rr	OIL CONSERVA	TION COMMISSION		
1. (ERTIFICATE OF COMPLIAN	C.E.	l i			
			APPROVED AUG 23 1982 . 19			
I hereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information give		il				
	above is true and complete to the best of my knowledge and belief.		Original stomed by			
			DRIGINAL SIGNED BY JERRY SEXUEN			
			TITLE DISTRICT 1 STORE			
J. F. Burnett		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 allow-				
Production Superintendent						
						(Tit
_	August 20, 1982		Fill out only Sections I, II, III, and VI for changes of owner,			
_	(Da	ie)) <u>1</u>	er, or other such change of condition.		
		:	Separate Forms C-104 must	be filed for each pool in multiply		