

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

I. Operator  
Enserch Exploration, Inc.

Address  
P. O. Box 4815, Midland, Texas 79704-4815

Reason(s) for filing (Check proper box)

New Well	<input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)  
11/1/82  
RECEIVED BY THE DISTRICT PRODUCTION MANAGER

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Taylor	Well No. 1	Pool Name, Including Formation Undesignated (Penn)	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter G ; 2280 Feet From The North Line and 2130 Feet From The East Line of Section 29 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"/> Phillips Petroleum Company - Trucks	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762					
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, 1st Nat'l Bank Bldg., Odessa, TX 79761					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 29	Twp. 4S	Pge. 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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9/21/81	Date Compl. Ready to Prod. 10/25/81		Total Depth 8250'		P.B.T.D. 8167'			
Elevations (DF, RKB, RT, GR, etc.) 4374.9' GR	Name of Producing Formation Pennsylvanian		Top Oil/Gas Pay 8086'		Tubing Depth 8029'			
Perforations 8086'-8109', 17 holes					Depth Casing Shoe 8250'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		344'		460 sx. - Circulated			
12-1/4"	9-5/8"		1895'		990 sx. - Circulated			
8-3/4"	5-1/2"		8250'		400 sx.			
	2-3/8"		8029'					

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 10/25/81	Date of Test 10/27/81	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 Hours	Tubing Pressure 250#	Casing Pressure Packer	Choke Size 24/64"
Actual Prod. During Test	Oil - Bbls. 324 Bbls.	Water - Bbls. 4 Bbls.	Gcs - MCF 334 MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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

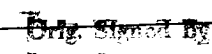
District Production Manager  
(Title)

November 9, 1981

(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 1981

BY   
Jerry Sexton

TITLE \_\_\_\_\_

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.