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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-11
Effective 1-1-65

107335
REC'D
SEP 13 1985
CRUDE OIL DEPT.

Operator J.M. Huber Corporation	
Address 1900 Wilco Building, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	
New Well <input checked="" type="checkbox"/>	Change in Transporter oil: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Other (Please explain) Casinghead gas from well must be obtained from the

If change of ownership give name and address of previous owner
THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Federal "27"	Well No. 1	Pool Name, including Formation EK Bone Spring	Kind of Lease XXXX Federal XXXX	Lease No. LC-064944
Location Unit Letter 0 ; 660' Feet From The south Line and 1980' Feet From The east Line of Section 27 Township 18S Range 33E, NMPL, Lea County				

EOTT Energy Operating LP

Enron Oil Trading & Transportation Co.

Name of Authorized Transporter of Oil or Condensate EOTT Energy Corp. Tesoro Crude Oil Company		Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188 Houston, TX 77251-1188 Effective 7-1-88 8700 Tesoro Drive, San Antonio, TX 78286				
Name of Authorized Transporter of Casinghead Gas To be determined		Address (Give address to which approved copy of this form is to be sent)				
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 27	Twp. 18S	Rge. 33E	Is gas actually connected? No	When November, 1985

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 6/10/85	Date Compl. Ready to Prod. 8/30/85		Total Depth 9810'		P.B.T.D. 9779'			
Elevations (DF, RKB, RT, GR, etc.) KB: 3815'	Name of Producing Formation EK Bone Spring		Top Oil/Gas Pay 8799'		Tubing Depth 9775'			
Perforations 8799-8801'; 03-04'; 06-08'; 21-26'; 29-32'; 34-35'; 9082-86'; 9105-13'; 9435-48'; 60-62'; 9659-63'; 95-99'; 9750-51'; 65-66'; (Sqz perfs. 9082-9113' w/150 SX cmt.)					Depth Casing Shoe 9810'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		350'		375			
11"	8-5/8"		3700'		2075			
7-7/8"	5-1/2"		9810'		2535			
	2-7/8"		9775'					

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 7/15/85	Date of Test 9/4/85	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 115	Water - Bbls. 25	Gas - MCF 95

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.
915/682-3794

Robert R. Glenn
(Signature)
District Production Manager
(Title)
9/9/85

OIL CONSERVATION COMMISSION
APPROVED SEP 11 1985
BY Edie W. Brown
TITLE Oil & Gas Inspector

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepener 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