Submit 5 Copies
Appropriate District Office
DISTRICT 1
F.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator						Well API No.					
Robert N. Enfield							31-	-025-31652	25-31652		
Address											
P. O. Box 2431, Sa	nta Fe	, NM 8	7504]	
Reason(s) for Filing (Check proper box)			T	_	U Othe	r (Please expla	(ייניו				
New Well Change in Transporter of:											
Recompletion	Oil Casinghea		Dry Gas Condens	_						i i	
If change of operator give name	Casiignea	u Uas 🔝			0.55				·		
t change of operator give name THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR											
II. DESCRIPTION OF WELL AND LEASE NOTIFY THIS OFFICE. R9843											
Lease Name	g Formation	3/17		Lease	Le	ase No.					
Hudson "31" Federal		1	Und	eigna	ed Buff	alo Queé	n Same	Federal OX ReeX	LC-C	069276	
Location H	2	310		_ No	orth	. 3	30 _	et From TheEa	ıst		
Unit Letter	:		. Feet Fro	m the	Lin	and	to	et From The		Line	
Section 31 Township	18 So	uth	Range	33 E	ast , N	мРМ,		Lea		County	
		•									
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
						Address (Give address to which approved copy of this form is to be sent)					
· - · · · · · · · · · · · · · · · · · ·						9801 Westheimer, Suite 900, Houston, TX 77042					
						Address (Give address to which approved copy of this form is to be sent)					
Conoco Inc.						P. O. Box 1267, Ponca City, OK 74603 Is gas actually connected? When?					
give location of tanks.						y connected?	When	<i>r</i> Approximat	-elv 1	/15/93	
If this production is commingled with that f	ļ				·			Ubbroxilligi	-ету 1	10130	
IV. COMPLETION DATA	.om any ou	.vvasc UI	hour Rive	· ~uminiiki	re order nam						
		Oil Wel	G	as Well	New Well	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v	
Designate Type of Completion -	· (X)	X	į	-	X	i	<u>i</u>		-	j	
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
10/15/92 11/6/92					4550 '			448	4483*		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
3743 GR	Queen				4423						
Perforations									Depth Casing Shoe		
4423 - 4432'								4549	9		
	TUBING, CASING AND										
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT				
12-1/4 "	8-5/8"			418'			275				
7-7/8 "	4-1/2"			4550			1675				
					 						
V TECT DATA AND DECLIC	TEOD	ALLOW	ADIE		l			<u> </u>			
V. TEST DATA AND REQUES OIL WELL (Test must be after re				il and much	he equal to a	r exceed ton all	lowable for th	is depth or he for	full 24 km	ars)	
Date First New Oil Run To Tank	Date of To		. oj toda c	w write must					J ET 180E		
					Producing Method (Flow, pump, gas lift, etc.)						
11/7/92 Length of Test	12/8/92 Tubing Pressure				Casing Press	Pumping wre		Choke Size			
						5					
24 Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
75	75			5			TSTM				
	<u> </u>				<u> </u>			, 20111			
GAS WELL Actual Prod. Test - MCF/D	Langth of	Test			Rhis Conde	nsate/MMCF		Gravity of Con	ndensie		
Actual Flore 1680 - MICE/D	ctual Prod. Test - MCF/D Length of Test				150.0. 00.000			Olavity of Colocusate			
Testing Method (pitot, back pr.) Tubing Pressure (Shui-in)					Casing Pres	sure (Shut-in)		Choke Size			
results include (plus, suck pr.)	Table Treasure (one m)				, , ,						
M OPERATOR CERTIFIC	LATE O	E COM	DITAN	ICE	1						
VI. OPERATOR CERTIFICATE OF COMPLIANCE						OIL CO	NSERV	ATION D	IVISI	NC	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above										- • •	
is true and complete to the best of my knowledge and belief.					DEC 1 5 '92						
						e Approvi	eu				
1 11 10 6	M	/ _>			∥ By_	, u r	Signed by	I			
Signature						Pat	Kerte	•			
Robert N. Enfield Operator					11	Ĝ	olog	i			
Printed Name Title 12/11/92 505-988-2863						9					
12/11/92 Date			elephone l								
Date				WE STATE	_1L			e de la compania de la marcina.			

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.