	NO. OF COPIES RECEIVED		<u> </u>	4,4810	
	DISTRIBUTION		ONSERVATION COM. SION	Form C-104	
	SANTA FE FILE	REQUEST	FOR ALLOWABLE AND	Supersedes Old C-104 and C-11 Effective 1-1-65	
	U.\$.G.\$.	AUTHORIZATION TO TRA	UCDODT ON	HEN	
	LAND OFFICE			TOW T	
	TRANSPORTER GAS		Co Co	5 198	
	OPERATOR		1073/8	UDE O// n	
1.	PRORATION OFFICE Operator		70/0/0	AS _{UN} 15 1984 UDE OIL DEPT.	
	Breck Operating Corp				
	P.O. Box 911, Breckenridge, Texas 76024				
	Reason(s) for filing (Check proper box) Effective 6-10-84 Other (Please explain)				
	New Well Recompletion	Change in Transporter of: CII X Dry Ga			
	Change in Ownership	Casinghead Gas Conden			
	If change of ownership give name				
	and address of previous owner				
11.	ESCRIPTION OF WELL AND LEASE Lease Name , Well No. Pool Name, Including Formation Kind of Lease Lease No.				
	Querecho Plains Unct 1 Querecho Plains (Penn) State, Federal NM-043174				
	Location				
	Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West				
	Line of Section 22 Tow	mship 18S Range 32E		Lea County	
ITE	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	Enron Oil Trading & Transports S P. O. Box 1128.	ation Co.	
111.	Name of Authorized Transporter of Oil	or Condensate	Address (Give address 7/251-1188 Pr.	fective 7-1-88 form is to be sent)	
	Name of Authorized Transporter of Cas	inghead Gas (v) or Dry Gas	P:0. Box 2297, Midland Address (Give address to which approv	ed copy of this form is to be sent)	
	Phillips Petroleum Com	Α	Bartlesville, Oklahoma	a_74004	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? Whe		
	<u> </u>	K 22 18S 32E		ovember 2, 1959	
	f this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Resty. Diff. Resty.				
	Designate Type of Completion - (X)		l l	, 13, 2002 Outlie 1,00 11 1	
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.,	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
•	Perforations		<u> </u>	Depth Casing Shoe	
	Petrolutions				
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
	AOLE SILE				
V.	TEST DATA AND REQUEST FOR ALLOWABLE (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)				
	OIL WELL Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, etc.)		
	Length of Test	Tubing Pressure	Casing Preseure	Choke Size	
	Actual Prod. During Test	Oil-Bbls.	Water-Bbis.	Gas-MCF	
	I				
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Methal Piod, 1001-1001/2				
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI.	. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION		
			JUN 1 1 1307		
	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.		Eddie W. Seav		
			Oil & Gas Inspector		
			TITLE This form is to be filed in compliance with RULE 1104.		
	Elizabeth Smith Elizabeth Smith		If this is a request for allowable for a newly drilled or deepenswell, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 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		
	(0.8.11.12.0)				
	Production Clerk (Title)				
	6-5-84 (Date)				
	(Ua	16/		t be filed for each pool in multipl	
			1 nametation constr-		