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

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

## State of New Mexico Ene., Minerals and Natural Resources Department

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

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

Santa Fe, New Mexico 87504-2088

1.		IO IRA	INS	PORT OIL	<u> </u>	TURAL GA	_				
Operator ///C WJC, Engineering							Well	API №. -300	25-2	8422	
Address 7 Pos			935	76		<del></del>		30-0	<del>~</del>	372	
P. O. Box 3857, Middle Reason(s) for Filing (Check proper box)	ind, Tex	kas <del>79</del>	<del>702</del>		O'L	et (Please expla	-:-1	<del></del>			
New Well		Change in	Trans	sporter of:	_		•				
Recompletion	Oil		Dry	Gas 🔲	ch	ange lee	su na	me from	w; C.E.	Brooks	
Change in Operator											
Enron Oil & Gas Company, P. O. Box 2267, Midland, Texas 79702											
II. DESCRIPTION OF WELL	AND LEA	ASE	,								
Brooks , C. E. Well No. Pool Name, Include the Name of					-			of Lease Fee Lease No. Federal or Fee			
Location	evolitaily	300011	<del></del>								
Unit Letter L : 1980 Feet From The						e and <u>660</u>	Fe	et From The West Line			
EOT Section 18 Township 17S Range 39E , NMPM, Lea County									County		
III. DESIGNATION CONTRACTOR OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil  X Corp Condensate  Address (Give address to which approved copy of this form is to be sent)											
Enron Oil Trading & Transp. Co. Live by 601.  Name of Authorized Transporter of Casinghead Gas Elico Live by 1293						P. O. Box 1188, Houston, Texas 77251-1188  Address (Give address to which approved copy of this form is to be sent)					
GPM Gas Corp.					588 Phillips Bldg Rartlesville OK 74004						
well produces oil or liquids, Unit		Sec.   Twp.   Rg		•	. Is gas actually connected?			When ? 1-23-84			
If this production is commingled with that f	rom any oth		pool, p		ing order num						
Designate Type of Completion		Oil Well	Ţ	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	. 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			
								Tubing Deput			
Perforations						Depth Casing Shoe					
TUBING, CASING AND					CEMENTI		D				
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLI	E				1	<del></del>		
OIL WELL (Test must be after re	covery of tol	al volume o							or full 24 hour	s.)	
Date First New Oil Run To Tank	Date of Tes	t			Producing Me	thod (Flow, pu	mp, gas lift, e	Ic.)			
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF			
GAS WELL	<u></u> .										
Actual Prod. Test - MCF/D	Bbls. Conden	sate/MMCF	<del></del>	Gravity of Condensate							
sting Method (pitot, back pr.)  Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFICATE OF COMPLIANCE						DIL CON	SERVA	1 NOITA	OIVISIO	N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION JUL 0 7 '92						
is true and complete to the best of my knowledge and belief.					N I	Date Approved					
Blow WICLE						ORIGINAL SIGNED BY JERRY SEXTON  By District I Supervisor					
Signature Betty Gildon, Regulatory Analyst 9156854171					By_		I SMICIO	. JUPEK VI			
Printed Name	.,		Title		Title						
4/30/92 Date	915/6	186-371 Telep	4 phone	No.							

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.