

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	Mitchell Energy Corporation
Address	P.O. Box 4000, The Woodlands, Texas 77387-4000
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well	Change in Transporter of:
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas
	<input type="checkbox"/> Dry Gas
	<input checked="" type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Unit	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Sapphire Federal	1	1	East Gem Morrow	State, Federal or Fee Federal	NM-63763
Location					
Unit Letter	J	1,650	Feet From The East	Line and 1,650	Feet From The South
Line of Section	23	Township	19S	Range	33E
				NMPM, Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

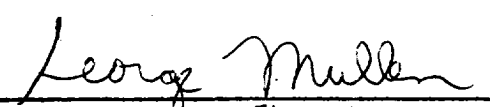
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Texaco Trading & Transportation, Inc.	P.O. Box 60628, Midland, TX 79711-0628					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Mitchell Energy Corporation	P.O. Box 4000, The Woodlands, TX 77387-4000					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	23	19S	33E	yes	9/20/89

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


George Mullen, Regulatory Affairs Specialist

(Title)
9/22/89

(Date)

OIL CONSERVATION DIVISION

SEP 27 1989

APPROVED _____, 19 _____

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X						
Date Spudded 12/31/88	Date Compl. Ready to Prod. 3/10/89	Total Depth 13,600				P.B.T.D. 13,555			
Elevations (DF, RKB, RT, GR, etc.) 3,639' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 13,266'				Tubing Depth 13,086'			
Perforations 13,226'-13,235', 13,244'-13,248', 13,250'-13,256', 13,261'-13,290', 13,421'-13,426', 13,440'-13,450'. 4SPF ²³¹ Holes						Depth Casing Shoe 13,598'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"		13 3/8"		475'		450 sx Class C			
12 1/4"		8 5/8"		5,230'		*			
7 7/8"		5 1/2"		13,598'		**			

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)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D 480	Length of Test 1.0	Bbls. Condensate/MMCF 0.3	Gravity of Condensate 54.3
Testing Method (pilot, back pr.) Back PR.	Tubing Pressure (shut-in) 3,905	Casing Pressure (shut-in) 0 (Pkr)	Choke Size 22/64

- * 2800 sx Howco Lite & 300 sx Premium Plus
- ** 350 sx 50/50 POZ thru shoe
- *** 1400 sx 50/50 POZ thru DV tool @ 12,280'

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