

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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Mitchell Energy corporation	Well API No. 30-025-31385
Address P.O. Box 4000 The Woodlands, TX 77387-4000	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Comanche "17" State	Well No. 1	Pool Name, Including Formation Hat Mesa-Morrow	Kind of Lease <u>State</u> Federal or Fee	Lease No. V-3427
Location Unit Letter <u>G</u> : <u>1880</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>17</u> Township <u>21S</u> Range <u>33E</u> , <u>NMPM</u> , 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"/> Koch Oil (a Div. of Koch Industries)	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, TX 76424					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 17	Twp. 21S	Rge. 33E	Is gas actually connected? Yes	When? May 17, 1992

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 11-4-91	Date Compl. Ready to Prod. 1-18-92		Total Depth 14,550'		P.B.T.D. 14,470'			
Elevations (DF, RKB, RT, GR, etc.) 3792' GR	Name of Producing Formation Morrow		Top Oil/Gas Pay 14,016'		Tubing Depth 13,942'			
Perforations 14,016-38' & 14,103-68'					Depth Casing Shoe 14,550'			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	505'	750
17 1/2"	13 3/8"	3810'	2250
12 1/4"	9 5/8"	5430'	565
8 3/4"	5 1/2"	14,550'	1400 + 1700 thru DV @ 9023'

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 Tank	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 2850	Length of Test 24 hrs.	Bbls. Condensate/MMCF 26	Gravity of Condensate 49.9
Testing Method (pilot, back pr.) Back pressure	Tubing Pressure (Shut-in) 4990	Casing Pressure (Shut-in) 0	Choke Size 15/64

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature James Blount
Printed Name James Blount Engineer
Date XXXXXX 5-20-92 Gm Title 915-682-5396
Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 27 '92
By ORIGINAL SIGNED BY JERRY SEATON
Title DISTRICT I SUPERVISOR

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.