DISTRIBUTION NEW MEXICO OIL CONSERVATION COX NTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-1 FILE Ellective 1-1-65 AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER GAS OPERATOR 16500 PRORATION OFFICE Operator Enron Oil & Gas Company P. O. Box 2267, Midland, Texas 79702 Reason(s) for filing (Check proper box) Other (Please explain) Recompletion 011 Dry Gas Change Operator Name Effective 4/1/88 Change in Ownership X Casinghead Gas Condensate If change of ownership give name Mobil Producing TX & NM Inc., 9 Greenway Plaza, Suite 2700, Texas 7704 and address of previous owner I. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Government "L" Com. Bell Lake, South Morrow Gas 1 State, Federal or Fee Federal NM 17446 Location 1980 north 1980 east Unit Letter Feet From The Line and Feet From The 18 245 34E l ea Township Line of Section Range , NMPM, Enron Oil Trading & Transportation Co. I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate X P. O. Box 1188 Address House adxx s 77251 1188 ro Effective of 1. 88 form is to be sent) 823 Midland Tower Bldg, Midland, Texas 7970 or Condensate √Tesoro Crude 0il Company Texas 79701 Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent) Transwestern Pipe Line Company Box 2521, Houston, TX 77001 Unit Is gas actually connected? When If well produces oil or liquids, 10/12/78 G 18 **24**S · 34E Yes If this production is commingled with that from any other lease or pool, give commingling order number: Same Hes'v. Diff. Res'v. Gas Well New Well Oll Well Workover Deepen Plug Back Designate Type of Completion - (X) Total Depth Date Compl. Ready to Prod. P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Top Oll/Gas Pay Name of Producing Formation Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE HOLE SIZE SACKS CEMENT DEPTH SET (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Choke Size Casing Pressure Length of Tust Tubing Pressure Water - Bble. Gas-MCF Actual Pred. During Test Oil-Bbla. GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test-MCF/D Length of Test Casing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) Tubing Presoure (Shut-in) OIL CONSERVATION COMMISSION 1. CERTIFICATE OF COMPLIANCE APR 4 1988 I hereby certify that the rules and regulations of the Oil Conservation ORIGINAL SIGNED BY JERRY SEXTON

3/31/88

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Regulatory Analyst Betty Gildon, (Title)

(Date)

This form is to be filed in compliance with RULE 1104, If this is a request for allowable for a newly drilled or despende well, this form must be accompanied by a tabulation of the daviation tests taken on the well in accordance with RULE 111.

DISTRICT I SUPERVISOR

TITLE _

All sections of this form must be filled out completely for allow able 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