

DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PHORATION OFFICE	

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-1
Effective 1-1-65

705014

Operator
Enron Oil & Gas Company

Address
P. O. Box 2267, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well	<input type="checkbox"/>	Change in Transporter of:		Other (Please explain)	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas	<input type="checkbox"/>
Change in Ownership	<input checked="" type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate	<input type="checkbox"/>

Change Operator Name Effective 4/1/88

If change of ownership give name and address of previous owner Mobil Producing TX & NM Inc., 9 Greenway Plaza, Suite 2700, Houston, Texas 77046

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Government "L" Com.	Well No.	2	Pool Name, Including Formation	Bell Lake, South Morrow	Kind of Lease	State, Federal or Fee	Fee	Lease No.	NM-1287
Location	Unit Letter K ; 1980 Feet From The south Line and 1800 Feet From The west									
Line of Section	18	Township	24S	Range	34E	NMPM,	Lea	County		

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Enron Oil Trading & Transportation Co.
P. O. Box 1188
Houston, TX 77251-1188 Effective 7-1-88

Name of Authorized Transporter of Oil ☐ or Condensate ☒
~~Tesoro Crude Oil Company~~

Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒
Transwestern Pipe Line Co.

Address (Give address to which approved copy of this form is to be sent)
823 Midland Tower Bldg, Midland, TX 79701

Address (Give address to which approved copy of this form is to be sent)
Box 2521, Houston, TX 77001

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually connected?	When
	K	18	24S	34E	Yes	5/13/80

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

III. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
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						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

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.

Betty Gildon, Regulatory Analyst
(Signature)
3/31/88
(Date)

OIL CONSERVATION COMMISSION

APR 4 1988

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 multiple