.) 1.	NO. OF COPIES RECEIVER . DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR PRORATION OFFICE Operator Enrop 0il & Gas Company	AUTHORIZATION TO TR	CONSERVATION COLLION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL	Form C-104 Supersedes Old C-104 and C+1 Elleciive 1-1-65 GAS
	Address P. O. Box 2267, Midlan Reason(s) for filing (Check proper bo New Well Recompletion Change in Ownership If change of ownership give name and address of previous owner	nd, Texas 79702		
11.	DESCRIPTION OF WELL AND Lease Name Madera 33 Federal Com Location Unit LetterJ ; 230	. 4 Pitchfork Rand	ch Atoka State, Fede	ral or Fee Federal NM 21511
	Line of Section 33 To	wnship 24S Range	34Е , ммрм,	Lea County
	Name of Authorized Transporter of OI Enron Oil Trading & Name of Authorized Transporter of Ca Enron Oil & Gas Comp. If well produces oil or liquids, give location of tanks.	Transportation Co. singhead EOT Energy Corp. any Effective 1-1-93 Unit L 33 24 34	Address (Give address to which appr P. O. Box 20108, Shree Address (Give address to which appr P. O. Box 2267, Midla Is gas actually connected?	oved copy of this form is to be sent)
	If this production is commingled with that from any other lease or pool, give commingling order number: <u>COMPLETION DATA</u> Designate Type of Completion - (X)			
	Date Spudded 7/19/87	Date Compl. Ready to Prod.	Total Depth 14,000'	P.B.T.D. 13,945'
	Elevations (DF, RKB, RT, GR, etc.) 3395.8' GR	Name of Producing Formation Atoka	Top Oll/Gas Pay 13,892'	Tubing Depth 2-7/8" at 13,026'
	Perforations 13,892' - 13,9Ç4'			Depth Casing Shoe 13,300'
		TUBING, CASING, AND CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT
	HOLE SIZE	11-3/4		250 DLW & 165 C1 C
	10-5/8	8-5/8	<u>611</u> 5250	1350 DLW & 165 CI C
.		5-1/2		······································
	7-7/8	3-1/2 Liner	13300 14000 TOL: 12072	950 DLW & 450 C1 H
ا بر	4-3/4		<u>14000 TOL: 12972</u>	135 C1 H
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal able for this depth or be for full 24 hours)				
Ī	Date First New Cil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, etc.)	
}	Length of Test	Tubing Pressure	Casing Pressure	Choke Size
	· · · · · · · · · · · · · · · · · · ·	<u>ب</u>		د
	Actual Prod. During Test	Oll-Bbls.	Water-Bbls.	Gas • MCF
			<u> </u>	
ſ	GAS WELL . Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	384	24 hours	7.8	58.1
ł	Testing Method (pirot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
Ľ	Back Pressure	4470	Sealed	16/64"
21. (CERTIFICATE OF COMPLIANCE		OIL CONSERV.	ATION COMMISSION
Ċ	Commission have been complied w	egulations of the Oil Conservation with and that the information given best of my knowledge and belief.	APPROVED DEC 2.1987	
	Ken All	don)		
-	(Signature)		well, this form must be accompanied by a tabulation of the deviation	
-	Betty Gildon, Regula	tory Analyst	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for sllow- able on new and recompleted wells. Fill out only Sections I, II, III, end 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	
-	(Tit	le)		
-	9/28/87 (Da	(e)		