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

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

1.	T	O TRAN	SPORT OIL	AND NA	TURAL GA	NS				
Operator				API No.						
D-Mil Production,			30-	025-2404)25-24047					
Address										
P.O. Box 49, Arg	yle, Texa	is 76226	5	Oth	er (Please expla	rin)				
Reason(s) for Filing (Check proper box)		Change in Tr	ansporter of		or to reme expen	,				
New Well	Oil		ry Gas							
Recompletion		Gas 😾 C		Fff.	ective 3/	/1/92				
			O. Box 558							
and address of previous operator	acado, II	10., F.	0. <u>Box 330</u>	11000	3, 1					
II. DESCRIPTION OF WELL	L AND LEA	SE								
Lease Name	,	Well No. Po	ool Name, Includi	ng Formation			Kind of Lease Lease No			
Elliott "31" Fede	ral	6]	Dollarhide	Devoni	an	State XFederal or				
Location								T.T +	• •	
Unit LetterD	:46.	7 F	eet From The	North Lin	e and <u>990</u>	Fe	et From The _	west	Line	
		~ n	201	. NI	MPM,	Lea			County	
Section 31 Towns	hip 245	S K	ange 381	<u>. , 141</u>	VII IVI,	nea				
III. DESIGNATION OF TRA	NSPORTER	OF OIL	AND NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Condensal		Address (Giv	e address to wi	hich approved	copy of this fo	orm is to be se	nt)	
Enron Oil Trading		portati	on	P.O. Bo	x 10607,	Midland	, TX 7	9702		
Name of Authorized Transporter of Cas		X 0:	r Dry Gas		e address to wi					
Sid Richardson Ca	rbon & G	<u>asline,</u>	Co.		y Bank To			t.,FT. V	Jorth, TX	
If well produces oil or liquids,	! :	Unit Sec. Twp. Rge.			y connected?	When	? '24/72			
give location of tanks.	D		24S 38E		yes •••	opplied				
If this production is commingled with the	at from any othe	r lease or po	oi, give comming	ing order num		трргиса	101			
IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	n - (X)	l .				İ	_		<u> </u>	
Date Spudded		. Ready to P	rod.	Total Depth			P.B.T.D.			
	Date Specific									
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	oducing Form	nation	Top Oil/Gas	Pay		Tubing Dept	Tubing Depth		
							Depth Casing Shoe			
Perforations							Depui Casin	g Shoc		
		UDDIC C	A CINIC AND	CEMENT	NG PECOP	חלי	<u> </u>			
	TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE			CEMENT	DEPTH SET			SACKS CEM	ENT	
HOLE SIZE	ING & TUB	SING SIZE		DEI III OE I						
										
V. TEST DATA AND REQU	EST FOR A	LLOWA	BLE	<u></u>						
OIL WELL (Test must be after	er recovery of tol	tal volume of	load oil and mus	i be equal to o	r exceed top all	owable for thi	s depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Tes	t		Producing M	lethod (Flow, p	ump, gas lift, i	elc.)			
				Cosing Pens	*150		Choke Size			
Length of Test	th of Test Tubing Pressure			Casing Press	arie					
	O'I DVI-	-		Water - Bbla			Gas- MCF			
Actual Prod. During Test	ctual Prod. During Test Oil - Bbls.									
				<u> </u>			<u></u>		-	
GAS WELL	Length of	Fast		Bbls Conde	nsate/MMCF		Gravity of C	Condensate		
Actual Prod. Test - MCF/D	Length of	i est		pois. Concension varies						
Traving Mathed (nites back pr.)	ting Method (pitot, back pr.) Tubing Pressure (Shut-in)			Casing Pres	sure (Shut-in)		Choke Size			
resulting telestical (place, calce pro-)		•								
VI. OPERATOR CERTIF	ICATE OF	COMPI	IANCE	1				D. // 2//	3 1	
I hereby certify that the rules and re					OIL COI				אכ	
Division have been complied with a	and that the infor	mation giver	above				MAR 10	190		
is true and complete to the best of r	ny knowledge ar	nd belief.		Dat	e Approve	ed				
1.	1.									
Monna 1/2	16.			Rv	· · · · · · · · · · · · · · · · · · ·					
Signature Hollow		7.0	gent	"						
Donna Holler Printed Name			Title	Title	9					
3/4/92		505-393	3-2727		<i>-</i>		- 17.			
Date 77.			hone No.	II.						

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.

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	BEOLIS	ST FOR	ALLOWAE	RIFAND	Al ITL	10017	ATION			
I.										
Operator	L AND NATURAL GAS Well API No.									
Estacado, Inc.				30 025 240)97	
Address										
P. O. Box 5. Reason(s) for Filing (Check proper box)	587, Hob	bs, NM	88241		(D)					
New Well	(Change in Trai	nsnorter of		er (Piea	se expla	in)			•
Recompletion	Oil		Gas			Ef	fective	: 11/01/	'91 (Gas)
Change in Operator		Gas X Con						,,	(,	,
If change of operator give name and address of previous operator										····
II. DESCRIPTION OF WELL	AND LEA	SE								
Lease Name			l Name, Includi	ng Formation				of Lease		ease No.
Elliott "31" Federa	3]	6 1	<u>DOLLARHID</u>	E DEVONI	:AN_		State [Federal or Fee	LC 06	9052
Location Unit LetterD	:467	Fee	t From The	North Lin	e and _	990	Fe	et From The _	West	Line
Section 31 Townshi	<u> 24-S</u>	Ras	nge 38-E	, N	мрм,	Lea		•		County
III. DESIGNATION OF TRAN	SPORTER	OF OIL	AND NATH	DAT. CAS						
Name of Authorized Transporter of Oil		or Condensate	THE HALL		e addre	ss to wh	ch approved	copy of this fo	rm is to be se	nt)
Enron oil Frad	mat 2	Murap								
Name of Authorized Transporter of Casin			Dry Gas							™TX 76102
Sid Richardson Carbon				1st City				Main St.	"Et.Wor	th,
If well produces oil or liquids, give location of tanks.	Unit :	Sec. Tw 31 20			•	cted?	When		1.70	•
If this production is commingled with that	from any other			ing order num				05/24	112	
IV. COMPLETION DATA		Oil Well	Gas Well	New Well	,		D	Dive De de	C D .l.	born .
Designate Type of Completion	- (X)	lon wen	Gas Well	New Well	l work	over į	Deepen	Plug Back	Same Kes v	Diff Res'v
Date Spudded	Date Compl	. Ready to Pro	d.	Total Depth		······································		P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			tion	Top Oil/Gas Pay				Tubing Depth		
Perforations				!				Depth Casing	3 Shoe	
	77	IRING CA	SING ANT)	CEMENTI	NG PI	FCORI				
HOLE SIZE		ING & TUBIN		CEMENTING RECORD DEPTH SET				SACKS CEMENT		
	0.10			DE THOE				SAOKS CEIVIER!		
	1							† — — — ·		
			· · · · · · · · · · · · · · · · · · ·							
	1							<u> </u>		
V. TEST DATA AND REQUES OIL WELL (Test must be after t				he equal to as		ton elle		. damih an ha f	'an 6.11 24 hav	1
OIL WELL (Test must be after r Date First New Oil Run To Tank	Date of Test		aa ou ana musi	Producing M					or juil 24 hou	75.)
	Date of Ica	•				, ,	. 70, 6-0 - 70, -	,		
Length of Test	Tubing Pressure			Casing Pressure				Choke Size		
Actual Prod. During Test Oil - Bbls.				Water - Bbis.				Gas- MCF		
										•.•
GAS WELL	•			•						•
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condensate/MMCF				Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pres	sure (Shut-in)		Casing Press	ure (Shi	ut-in)		Choke Size		
,										
VI. OPERATOR CERTIFIC	ATE OF	COMPLI	ANCE		~ 11 -		een.	ATION!	רון אירייר הוא אירייר	
I hereby certify that the rules and regul					JIL (CON	SERV	ATION I	אפועוכ	אכ
Division have been complied with and is true and complete to the best of my			bove	Date	a Anr	orove	4			
Smale	1	and	2~	11	۰۰٬۳۲					
Signature Donald L Cana		D	100	∥ By_			eng Sign P aul Ka	ed by		
Donald L. Gare	λ	Pres	ident			. * -	Paul Ka Geolog	ia t		
A HILLOW AVAILE	/			Title			· SE ANYAR			

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Date

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

<u>392-6300</u>

Telephone No.

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