

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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	GAS	
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PROMOTION OFFICE		

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator ESTACADO, INC.	
Address P. O. BOX 5587, HOBBS, NEW MEXICO 88241	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Condensate EFFECTIVE: 9-1-87

If change of ownership give name and address of previous owner ENRON OIL & GAS COMPANY, P. O. BOX 2267, MIDLAND, TX 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name ELLIOTT "31" FEDERAL	Well No. 6	Pool Name, Including Formation DOLLARHIDE DEVONIAN	Kind of Lease State, (Federal) or Fee FED.	Lease No. LC069052
Location Unit Letter <u>D</u> : <u>467</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>West</u> Line of Section <u>31</u> Township <u>24-S</u> Range <u>38-E</u> , NMPM, <u>Lea</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading & Transportation, Inc.	Address (Give address to which approved copy of this form is to be sent) Box 20108, Shreveport, LA 71120	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 31
	Twp. 24	Rge. 38
	Is gas actually connected?	When
	Yes	5-24-72

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

NOTE: Complete Parts IV and V on reverse side if necessary.

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


(Signature)
President
(Title)
September 9, 1987
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 11 1987, 19____
BY _____
ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

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 multiply completed wells.