DISTRIBUTION ANTA FE

NEW MEXICO OIL CONSERVATION COMM. ON REQUEST FOR ALLOWABLE

Form C-104 **:-1**;

| | ILE | | AND | | | Supersedes Old C-104 and C Effective 1-1-65 | |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|--------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|--|
| | 1. 5. G. 5. | | AUTHORIZATION TO T | | THE AND MATHRAL | - · · · | |
| | LAND OFFICE | | AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | | . GAS | |
| | TRANSPORTER OIL | | | | | | |
| | GAS | | 4 | | | | |
| | PRORATION OFFICE | | | | | | |
| • | Operator | | | | | | |
| | Quinoco Petroleum, Inc. | | | | | | |
| | Stanford Place 3, 4582 South Ulster St Parkway, Suite 1700, Denver, CO 80237 | | | | | | |
| | Reason(s) for filing (Check proper box) | | | Other (Please explain) | | | |
| | Recompletion | Change in Transporter of: | c=- | EFFECTIVE | 1/1/89 | | |
| | Change in Ownership X Casinghead Gas Condensate | | | | | | |
| | If change of ownership give name | | | | | | |
| | and address of previous owner Enron Oil & Gas Company, Box 2267, Midland, Texas 79702 | | | | | | |
| П | DESCRIPTION OF WELL | DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease | | | | | |
| | Bell Lake 11 Federal 1 Vaca Draw | | | Legse No. | | | |
| | Location B 1980 - Oast 660 | | | | | | |
| | | | | | Feet From | The north | |
| | Line of Section | Town | , , and | 33E | , NMPM, Lea | County | |
| III. | Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) | | | | | | |
| | Enron Oil Trading & Transp. Inc. | | | Box 20108, Shreveport, IA 71120 | | | |
| | Name of Authorized Transporter of Casinghead Gas or Dry Gas V | | | Address (Give address to which approved copy of this form is to be sent) | | | |
| | Transwestern Pipe | | Jnit Sec. Twp. Rge. | Box 2521, Houston, Texas 77001 | | | |
| | If well produces oil or liquids, oil sec. Twp. Fige. | | | Yes 1/23/82 | | | |
| IV | If this production is commingled with that from any other lease or pool, give commingling order curbon | | | | | | |
| | Oil Well Gas Well | | | New Well | Workover Deepen | Plug Back Same Resty. Diff. Resty. | |
| | Designate Type of Com | · | | | 1 | Same Nesty. Ditt. Resty. | |
| | | | Cate Compl. Ready to Prod. | Total Depth | | P.B.T.D. | |
| | Elevations (DF, RKB, RT, GR, | etc., N | ame of Producing Formation | Top Oil/Gas 1 | Рау | Tubing Depth | |
| | Perforations | | | | | Death Control Sh | |
| | Depth Casing Shoe | | | | | | |
| ŀ | | | | AND CEMENTING RECORD | | | |
| ı | HOLE SIZE | | CASING & TUBING SIZE | <u>D</u> | EPTH SET | SACKS CEMENT | |
| ſ | | | | | | | |
| [. | | | | | | | |
| | | | | | | | |
| | TEST DATA AND REQUEST FOR ALLOWABLE (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) | | | | | | |
| Ī | Date First New Oil Run To Tanks Date of Test | | | Producing Method (Flow, pump, gas lift, etc.) | | | |
| ŀ | Length of Test | | ibing Pressure | | | | |
| | | | | Casing Pressure | | Choke Size | |
| | Actual Prod. During Test | 01 | i-Bbis. | Water - Bbls. | | Gas - MCF | |
| '- | | | | | | | |
| _ | GAS WELL Actual Prod. Test-MCF/D | Le | ngth of Test | Bbls. Condense | No AA (CE | | |
| L | | | | Bota. Concenso | ITT MMCF | Gravity of Condensate | |
| | Testing Method (pitot, back pr.) | Tu | bing Pressure (Shut-in) | Casing Pressur | · (Shut-in) · | Choke Size | |
| _ I. (| CERTIFICATE OF COMPL | ANCE | | | OU CONSERVA | | |
| | | | | | OIL CONSERVAT | B 0 3 1989 | |
| I | hereby certify that the rules of | nereby certify that the rules and regulations of the Oil Conservation mmission have been complied with and that the information given | | | | | |
| g | boye is true and complete to | the be | and that the information given at of my knowledge and belief. | Drig. Signed by Paul Kauts | | | |
| | | | | TITLE Geologist | | | |
| (| | | | | | | |
| _ | Halles Herlardson | | | | a request for allowal | mpliance with RULE 1104. | |
| H | Holly Richardson (Signature) | | | | 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 | | |
| P | Production Technician (Title) | | | | tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow- | | |
| 1 | 1/23/89- | | | | able on new and recompleted wells. | | |
| | (Date) | | | | 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. | | |
| | | | {{ | C | Forms C-1M must b | a filed for each anal in multiply | |
| | • • | | | | | | |

RECEIVED

FEB 2 1989 OCD HOBBS OFFICE