NO. OF COPIES RECEIVED DISTRIBUTION I.

III.

IV.

	SANTA FE		CONSERVATION COMESSION TFOR ALLOWABLE	Form C-104
	FILE	REQUES	AND ALLOWABLE	Supersedes Old C-104 and Co Effective 1-1-65
	u.s.g.s.	AUTHORIZATION TO TI	RANSPORT OIL AND NATURA	
	LAND OFFICE		CARSI SICT SIE AND NATURA	AL GAS
	TRANSPORTER OIL			
	GAS			
	OPERATOR			
I.	PRORATION OFFICE			
	Enron Oil & Gas Company			
	P. O. Box 2267, Midland, Texas 79702			
	Reason(s) for Isling (Check proper box) Other (Please explain)			
	New We!l Change in Transporter of:			
	Recompletion X	Oil . Dry C	Gas 🔲	•
	Change in Ownership	Casinghead Gas Cond	lensate -	•
	If change of ownership give name	•		
	and address of previous owner			
II.	DESCRIPTION OF WELL AND LEASE $8/1/87$ $R-8483$			
	Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No.			
	Chaparral 10	l Pitchfork R	anch Atoka Las State, Fed	deral or Fee Fee
	Location	000	1000	
	Unit Letter B;	990 Feet From The north L	ine and 1980 Feet Fro	om The
	Line of Section 10	rownship 25S Range	34E NASIA I	.ea
		Township 255 Range	, NMPM, I	County
II.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
	Name of Authorized Transporter of	or Condensate XX		proved copy of this form is to be sent)
Ì	Enron Oil Trading &		Co. P. O. Box 20108, Shrevepo	
ĺ	Name of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent)	
	Transwestern Pipeline		P. O. Box 2521, Houston, Texas 77001	
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. B 10 25 34	Is gas actually connected? Yes	When 5/29/87
				3/29/8/
v. '	If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA			
	Designate Type of Complete	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
				X X
	Date Spudded 2/25/87	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
ŀ	Elevations (DF, RKB, RT, GR, etc.,	5/23/87 Name of Producing Formation	15,440	14,100'
I	3340.8' GR	Atoka	Top 0:1/Gas Pay 14017	Tubing Depth 2-7/8' At 12,964'
ı	Perforations	11000	14017	Depth Casing Shoe
	14017 - 14029			
	TUBING, CASING, AND CEMENTING RECORD			
L	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
-	17-1/2	13-3/8	624	515
. }-	12-1/4	9-5/8	5200	2475
-	8-3/4 6-1/8	4-1/2 Liner	13250	1200
יי ריי	FEST DATA AND REQUEST 1		15440 TOL: 129	
	OIL WELL		epth or be for full 24 hours)	il and must be equal to or exceed top allow
	Date First New Cil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
L	Length of Test	Tubing Pressure		
'	Cendry or 1 ear	I up my P Liberara	Casing Pressure	Choke Size
-	Actual Prod. During Test	Oil-Bbls.	Water - Bbls.	Gas-MCF
	GAS WELL			
- 1	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
<u> </u> -	120 Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	56.0
- 1	Back Pressure	5700	Sealed	16/64"
	ERTIFICATE OF COMPLIAN			ATION COMMISSION
. •		9 .		,
1	hereby certify that the rules and regulations of the Oil Conservation commission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		APPROVEDJUN	3 1987 . 19
C				
		best of my knowledge and benefit	ORIGINAL SIGNED BY JERRY SEXTON	
	. 0		TITLE DISTRICT I SUPERVISOR	
•	D X.V		This form is to be filed in compliance with RULE 1104.	
_	Promy Hildon		If this is a request for allowable for a newly drilled or despened	
	(Signature)		well, this form must be accompanied by a tabulation of the deviation	
_	Betty Gildon, Regulatory Analyst		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-	
(Title) 6/2/87			able on new and recompleted wells.	
_		nte)	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	
	70	,		
		•		• •

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