

OIL CONSERVATION DIVISION

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Enron Oil & Gas Company		Well API No. 30-025-30632
Address P. O. Box 2267, Midland, Texas 79702		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Diamond 8 Federal	Well No. 1	Pool Name, Including Formation Pitchfork Ranch Morrow	Kind of Lease FED State, Federal or Fee	Lease No. NM 14497
Location Unit Letter B : 660 Feet From The north Line and 2310 Feet From The east Line Section 8 Township 25S Range 34E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate <input checked="" type="checkbox"/> Enron Oil Trading & Transp.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 20108, Shreveport, LA 71120	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> Enron Oil & Gas Company	Address (Give address to which approved copy of this form is to be sent) Box 2267, Midland, Texas 79702	
If well produces oil or liquids, give location of tanks.	Unit B Sec. 8 Twp. 25S Rge. 34E	Is gas actually connected? <input checked="" type="checkbox"/> When? 2/5/90

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 10-9-89	Date Compl. Ready to Prod. 1-28-90	Total Depth 15,675'		P.B.T.D. 15,541' 15,425'				
Elevations (DF, RKB, RT, GR, etc.) 3364.0' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 15,214'		Tubing Depth 2-7/8" @ 14,750'				
Perforations 15,214' - 15,279'				Depth Casing Shoe 13,250'				

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
16"	20"	651'	660 sx C1 C
10-3/4"	14-3/4"	5200	3000 sx C1 C
7-5/8"	9-1/2"	13250'	700 35/65 H & 450 C1 H
6-1/2"	5-1/2"	15672' TOL: 12925'	575 sx C1 H

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 3950	Length of Test 24 hours	Bbls. Condensate/MMCF 00051 0.51	Gravity of Condensate 50.2
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 5750	Casing Pressure (Shut-in) 0	Choke Size 17/64"

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

Signature
Betty Gildon
Regulatory Analyst
Printed Name
2/6/90
Date
(915) 686-3714
Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 09 1990
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
Title

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.