Submit 5 Copies Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerais and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

TO TRANSPORT OIL AND NATURAL GAS

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

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

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator		_					Well	API No.			
Enron Oil & Gas	Company	/					30	0253224	6		
Address D. O. Boy 22C7	M2 47	1 7	7070								
P. O. Box 2267, Reason(s) for Filing (Check proper box		1, IX	/9/02	<u>'</u>			 				
New Well	;)	Change	a Tman	porter of:		er (Please ex	olain)				
Recompletion	Oil	Change	Dry (
Change in Operator	Casinghe	ad Gas	- -	ensate							
f change of operator give name	Canagar						Approvat!	o flare ca	singhead	gas from	
nd address of previous operator							for mail o	oust be o	btained fr	om the	
I. DESCRIPTION OF WEL	L AND LE	ASE					445.5745.5E	GAJACH SIZHN	ingewehr (BLM)	
Lease Name			Pool	Name, Includi	ng Formation	Wolf.	Kind	of Lease	EDI L	ease No.	
Diamond 7 Feder	al	2			Bone Spi			Federal or Fe	_	14497-A	
Location							•				
Unit Letter G	:19	980	_ Feet 1	From The	orth Lin	e and	.780 _F	et From The	east	Line	
7	21	- c		245							
Section / Town	ship 23	S	Rang	<u>34E</u>	, N	MPM,	Lea			County	
II DESIGNATION OF TO	NICRADITY	en or c		NES 314 (1991)	D.1. G.6						
II. DESIGNATION OF TRA Name of Authorized Transporter of Oil		or Conde		ND NATU		e eddaaa ta	which approved				
EOTT Energy Cor	1 8 1	OI COMO	-118810		Box 466	66 - Hous	ston, Tex	as 7721	'orm is io be se N=4666	int)	
Name of Authorized Transporter of Ca			or Dr	y Gas	-		which approved				
				,			which upproved	copy of inis)	orm is to be se	ent)	
If well produces oil or liquids,	Rge	Is gas actually connected? When ?									
ive location of tanks.	i G	7	Twp.		No		i				
this production is commingled with the	at from any ot	her lease o	r pool, g	ive comming	ing order num	ber:					
V. COMPLETION DATA											
Designate Type of Completic	m • (X)	Oil We	n	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	······································	X Pandy	n Pond		Total Depth			<u> </u>	<u> </u>		
Date Spudded Date Compt. Ready to Prod.						5001		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of I	Name of Producing Formation				12,600 ' Top Oil/Gas Pay			12,507'		
3399.5' GR	Bone Spring				12,2	•		Tubing Dep	Tubing Depth		
Perforations					12,0	207		Depth Casing Shoe			
12.267'-12.371'									.6 000		
	•	TUBING	, CAS	ING AND	CEMENTI	NG RECO	RD				
HOLE SIZE		CASING & TUBING SIZE				DEPTH SE		SACKS CEMENT			
14-3/4	11-	11-3/4			662	2		351 C1 C			
11		8-5/8			5165	5		1475 PSL & 225 C1 C			
7-7/8	7-7/8 5-1/2				12598	3	· · · · · · · · · · · · · · · · · · ·	1300 Cl H & 226 Micros			
. TEST DATA AND REQU	FST FOR	ALLOU	ADIT	,							
OLL WELL Test must be afte					he savel to save		llanahla kamak	:- dat t -	6 6-11-34-1	\	
te First New Oil Run To Tank	Date of Te		e by route	ou unu musi	Producing M	ethod (Flow.	numn, eas lift	etc.)	for Juli 24 nou	73.)	
12/11/93					Producing Method (Flow, pump, gas lift, etc.) Flowing, gas lift						
ength of Test	Tubing Pr	Tubing Pressure				ıre		Choke Size			
24 hrs		na				800		16/64			
Actual Prod. During Test	Oil - Bbls	Oil - Bbls.				Water - Bbis.			Gas- MCF		
707					136			750			
GAS WELL											
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conden	sate/MMCF		Gravity of	Condensate		
esting Method (puot, back pr.)	g Method (puot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
					ļ						
I. OPERATOR CERTIFI	CATE OF	F COM	PLIA	NCE			NOFF	ATION:	D. # C : C		
I hereby cerufy that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION						
Division have been complied with ar is true and complete to the best of m		_	ven abov	re				DEC 17	ະດາວ		
and and animpted to the nest of the	, amowiedige a	we ochich.			Date	Approv	ed	11	1272		
6 7 JA.	W1.)	i									
Signature Betty Gildon, Regulatory Analyst					By ORIGINAL SIGNED BY JERKY SEXTON						
	egulator	y Ana	lyst				DIST	RICT I SUP	FKA12OK		
Printed Name		5/686		-	Title						
Date			enhone								
a real.											

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.