•	U.S.G.S. LAND OFFICE TRANSPORTER OIL / GAS OPERATOR PRORATION OFFICE	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL	GAS Littoctive 1-1-65
Operator Fairfax Exploration, Inc.				
Address 301-B Graceland S.E., Albuquerque, N.M. 87108				
	Reason(s) for filing (Check proper box) New Well	Change in Transporter of:	Office (Freday explain)	•
	Recompletion	Oil Dry Ga	77	
	Change in Ownership	Casinghead Gas Conden	sate	
If change of ownership give name and address of previous owner				
	-	FACE	•	
11.	DESCRIPTION OF WELL AND I	Well No. Pool Name, including Fo	0	
	Bullseye 3 Undesignated-Dakota State, Federal or Fee Fee			
	Unit Letter N : 700 Feet From The South Vine and 1650 Feet From The West			
	10	10 Novemb		cKinley County
	Line of Section 18 Tow	mship 16 NOTTH Range	TI NESC , INMEM, II	CKIMIEY
Ш.	I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS News of Authorized Transporter of Oil vi or Condensate Address (Give address to which approved copy of this form is to be sent)			
	Name of Authorized Transporter of Oil The Permian Corpora	Corporation 202 Petroleum Plaza Bldg. Fa		
	Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be se			oved copy of this form is to be sent)
		Unit Sec. Twp. Rge.	Is gas actually connected? W	hen
	If well produces oil or liquids, give location of tanks.			
	If this production is commingled with that from any other lease or pool, give commingling order number:			
IV.	COMPLETION DATA	Cil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty
	Designate Type of Completio	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Dail opasses	4 May 1, 1976	1952	1885
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay 1805	Tubing Depth 1864
	7248 GR	Dakota "A"	1003	Depth Casing Shoe
	1797-1805, 1809-1817, 1	822-1828,1833-1844 4	shots/ft.	1952
	HOLE SIZE	TUBING, CASING, AND	D CEMENTING RECORD DEPTH SET	SACKS CEMENT
	11 1/2	8 5/8	106	Cemented to surface
	6 1/4	4 1/2 2 3/8 EUE	1952 1864	165
	4			
V	V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to able for this depth or be for full 24 hours)			il and must be equal to or exceed top allow
	OII. WELL Date First New Oil Run To Tanks Date of Test		Producing Method (Flow, pump, gas lift, etc.)	
	May 1, 1976	May 10, 1976 Tubing Pressure	Pump Casing Pressure	Choke Size
	Length of Test 24 Hrs.	15-25# Oil-Bbis.	265#	2"
	Actual Prod. During Test		Water-Bbis.	Gas - MCF
		22		
	GAS WELL		Bbls. Condensate/MMCF	Gravity of Condensate
	Actual Prod. Test-MCF/D	Length of Test		
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choka Size
		OF.	OIL CONSERV	ATION COMMISSION
VI	. CERTIFICATE OF COMPLIANCE			IMAY 2 / 1
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		APPROVED WAY 2	
	Commission have been complete with best of my knowledge and belief. (Signature) president (Title) May 25, 1976 (Date)		TITLE 22-	
			TITLE This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepend 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 conditions. Separate Forms C-104 must be filed for each pool in multip	
	The same of the sa	gen compare and the compare of the c	completed wells	