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NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PRORATION OFFICE Operator CHACE OIL COMPANY, INC. Address 87108 Albuquerque, NM 313 Washington S.E. Reason(s) for filing (Check proper box) Other (Please explain) DATE OF CHANGEDOEN Change in Transporter of: New Well XXDry Gas Oil Recompletion 4-1-78 Condensate Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE
Well No. Pool Name, Including Formation Lease No. Kind of Lease 15 State, Federal or Fee INDIAN CHACON DAKOTA CHACE APACHE 15 2 Locution 1000' EL 1775' SLFeet From The Line and Feet From The_ Sandova1 Township 23N 3W County 20 NMPM, Range Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Non-e of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183 Houston, TX 7700
Address (Give address to which approved copy of this form is to be sent) PERMIAN CORPORATION Name of Authorized Transporter of Casinghead Gas X or Dry Gas P. O. Box 1492 El Paso, TX EL PASO NATURAL GAS COMPANY Is gas actually connected?
Yes If well produces oil or liquids, give location of tanks. 10-7-77 20 23N T If this production is commingled with that from any other lease or pool, give commingling order number: Plug Back Same Restv. Diff. Restv. IV. COMPLETION DATA Designate Type of Completion - (X) X Well Gas Well X P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded 7486 1 8-8-77 7-18-77 Tubing Depth Name of Producing Formation 771512Gas 7212 Elevations (DF, RKB, RT, GR, etc.) 7176' 7258**-** 7290 DAKOTA A & B 7250 GR 7263 RKB Depth Casing Shoe Perforations 7154 - 82', 7203 - 09' and 7264 - 7278' TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 155 900 8-5/8 <u>4-1/2</u> 7-7/8 (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) . TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Dute First New Oil Run To Tanks Flowing 9-1<u>0-77</u> 8-11-77 Choke Size Casing Pressure Tubing Pressure Length of Test <u>3/4"</u> <u>850#</u> **400**# 24 hrs. Water - Bbis. Oil - Bbls. Actual Prod. During Test 17,6~ 0 78 Same as Shown GAS WELL Gravity of Condensate Bbis. Condensate/MMCF MAR 2 2 1978 Length of Test Actual Prod. Test-MCF/D Casing Pressure (Shut-in) OIL CON. COM. Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) NON COMMISSION OIL CONSERVAT VI. CERTIFICATE OF COMPLIANCE APPROVED. I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Original Signed by A. R. Kendrick TITLE _ This form is to be filed in compliance with RULE 1104. 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 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. President

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.

(Title)

(Date)

3-20-78