OIL CONSERVATION DIVISION P. O. HOX 2088

| | SANTA FE, NEW MEXICO 87501 FOR UNU II. CARD OFFICE PEQUEST FOR ALLOWABLE | | | | | |
|--|---|---|--|---|--|--|
| :. | AND OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS FAGRATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | | | | |
| | El Paso Exploration Company | | | | | |
| | 1800 Wilco Building - Midland, Texas 79701 | | | | | |
| | Reason(s) for filing (Check proper box) New Well Change in Transporter of: | | | | | |
| | Recompletion Change in Ownership X | OII Dry C | ; ≍{ | | | |
| | If change of ownership give name | | erisale | 2000 - | | |
| - 4 | DECORPORADO OF HELL AND | Odessa Natural Corpora | ation, P. O. Box | 3908, Odes | ssa, Texas 79760 | |
| ••• | DESCRIPTION OF WELL AND | Lease Name Well No. Pool Name, including Formation Kind of Lease Lease No. | | | | |
| | Gulf Little Federal 25 2 Undesignated P. C. State, Federal for Fee NM28756 | | | | | |
| | | 20 Feet From The <u>North</u> Li | Ine and <u>1830</u> | Feet From | The West | |
| | Line of Section 25 To | ownship 25N Range | 10W , NMP | м, Sa | n Juan County | |
| П. | DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Rome of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be | | | | ved copy of this form is to be sent) | | |
| | If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. | is gas actually connec | red? Wh | en | |
| | If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA | | | | | |
| | Designate Type of Completi | on - (X) Oil Well Gas Well | New Well Workover | Deepen | Plug Back Same Res'v. Diff. Rez'v | |
| | Date Spudded | Date Compl. Ready to Prod. | Total Depth | 1 | P.B.T.D. | |
| | Elevations (DF, RKB, RT, GR, etc.,) | Name of Producing Formation | Top Oll/Gas Pay | | Tubing Depth | |
| | Perforations | | <u> </u> | | Depth Casing Shoe | |
| - | TUBING, CASING, AND CEMENTING RECORD | | | | | |
| ٠. ا | HOLE SIZE | CASING & TUBING SIZE | DEPTH S | ET | SACKS CEMENT | |
| - | | | | | | |
| - | | | | | | |
| ∵. | TEST DATA AND REQUEST FOOLL WELL | | feer recovery of total vol pth or be for full 24 hour | | and must be equal to or exceed top allow | |
| Ì | ite First New Oil Run To Tanks Date of Test | | Producing Method (Flo | Froducing Method (Flow, pump, gas lift, etc.) | | |
| - | Length of Teet | Tubing Pressure | Casing Pressure | | Chote Size | |
| | Actual Prod. During Tool | Oil-Bble. | Water-Bbie. | | 94-MCF 3 3 1981) | |
| | GAS WELL | | | | 15 15 ST. 3 | |
| | Actual Prod. Test+MCF/D | Length of Teet | Bble. Condenegte/MMC | F | Gravity of Condensate | |
| j | Testing hielhod (pitot, back pr.) | Tubing Pressure (shut-is) | Cusing Pressure (Shut | -ia) | Choke Size | |
| L CERTIFICATE OF COMPLIANCE | | | OIL CONSERVATION DIVISION | | | |
| 1 | I hereby certify that the rules and re | APPROVED JUN 191981 . 19 | | | | |
| | Division have been complied with subove is true and complete to the | | | | | |
| | | | | | | |
| | A. G. Suis | | | | | |
| (Signature) | | | If this is a request for allowable for a newly drilled or despensed well, this form must be accompanied by a inheliation of the deviation tests taken on the well in accordance with AULK its. | | | |
| . | Drilling Clerk | All sections of this form must be filled out completely for allowable on new and recompleted wells. | | | | |
| June 18, 1981 | | | Fill out only Sections 1, II, III, and VI for changes of uwner. | | | |

Fill out only Sections 1, II, III, and VI for changes of owner, well name or number, or transporter, or other such thange of condition. Reparate Forms C-104 must be filed for each pool in multiply completed wells.

(Date)