

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Mesa Petroleum Co.

1660 Lincoln Street, Suite 2800, Denver, CO 80264-2899

|                                       |                                     |                           |                                                              |
|---------------------------------------|-------------------------------------|---------------------------|--------------------------------------------------------------|
| Name(s) for filing (Check proper box) |                                     | Other (Please explain)    |                                                              |
| Well                                  | <input checked="" type="checkbox"/> | Change in Transporter of: |                                                              |
| Completion                            | <input type="checkbox"/>            | Oil                       | <input type="checkbox"/> Dry Gas <input type="checkbox"/>    |
| Change in Ownership                   | <input type="checkbox"/>            | Casinghead Gas            | <input type="checkbox"/> Condensate <input type="checkbox"/> |

Name of ownership give name  
Address of previous owner

|                               |  |          |                                |                               |           |
|-------------------------------|--|----------|--------------------------------|-------------------------------|-----------|
| DESCRIPTION OF WELL AND LEASE |  | Well No. | Pool Name, including Formation | Kind of Lease                 | Lease No. |
| McLeod                        |  | 2E       | Basin Dakota                   | State, Federal or Fee Federal | SE 046563 |

|         |    |          |               |       |          |      |               |        |
|---------|----|----------|---------------|-------|----------|------|---------------|--------|
| Section | E  | 1530     | Feet From The | North | Line and | 930  | Feet From The | West   |
| Section | 34 | Township | 28N           | Range | 10W      | NMPM | San Juan      | County |

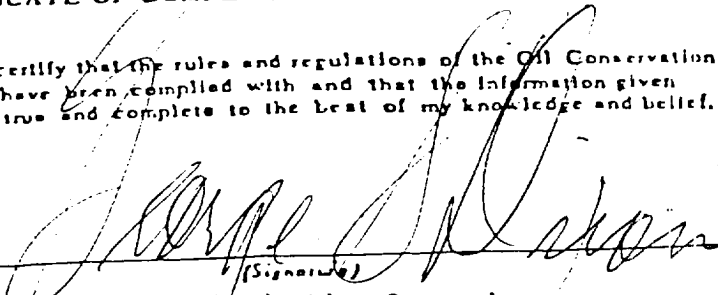
|                                                                                                                  |                     |                                                                          |          |
|------------------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------|----------|
| SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS                                                                  |                     | Address (Give address to which approved copy of this form is to be sent) |          |
| Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Permian Corporation | P. O. Box 1183, Houston, TX 77001                                        |          |
| Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Mesa Petroleum Co.  | 1660 Lincoln Street, Denver, CO 80264-2899                               |          |
| Unit                                                                                                             | Sec.                | Twp.                                                                     | Rge.     |
| E                                                                                                                | 34                  | 28N                                                                      | 10W      |
| Is gas actually connected?                                                                                       | Yes                 | When                                                                     | 12-18-81 |

|                                                                                                                  |                     |                                                                          |          |
|------------------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------|----------|
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| Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Permian Corporation | P. O. Box 1183, Houston, TX 77001                                        |          |
| Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Mesa Petroleum Co.  | 1660 Lincoln Street, Denver, CO 80264-2899                               |          |
| Unit                                                                                                             | Sec.                | Twp.                                                                     | Rge.     |
| E                                                                                                                | 34                  | 28N                                                                      | 10W      |
| Is gas actually connected?                                                                                       | Yes                 | When                                                                     | 12-18-81 |

|                                      |                      |             |                   |
|--------------------------------------|----------------------|-------------|-------------------|
| TUBING, CASING, AND CEMENTING RECORD |                      |             |                   |
| HOLE SIZE                            | CASING & TUBING SIZE | DEPTH SET   | SACKS CEMENT      |
| 12-1/4"                              | 8-5/8" - 24#         | 312' KB     | 240 sxs Class "B" |
| 7-7/8"                               | 5-1/2" - 15.5#       | 6616.93' KB | 175 sxs RFC       |
|                                      |                      |             | 350 sxs 65-35 POZ |
|                                      |                      |             | DV @ 2417'        |

|                                                                                                                                              |                 |                                               |            |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-----------------------------------------------|------------|
| TEST DATA AND REQUEST FOR ALLOWABLE WELL                                                                                                     |                 |                                               |            |
| (Test must be after recovery of total volume of load oil and must be equal to or exceed top all able for this depth or be for full 24 hours) |                 |                                               |            |
| First New Oil Run To Tanks                                                                                                                   | Date of Test    | Producing Method (Flow, pump, gas lift, etc.) |            |
| Depth of Test                                                                                                                                | Tubing Pressure | Casing Pressure                               | Choke Size |
| Val Prod. During Test                                                                                                                        | Oil - Bbls.     | Water - Bbls.                                 | Gas - MCF  |

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| TEST WELL                        |                           |                           |                       |
| Val Prod. Test - MCF/D           | Length of Test            | Bbls. Condensate/MMCF     | Gravity of Condensate |
| Test to be run down pipeline.    |                           |                           |                       |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |
|                                  | SITP - 2280 psi           |                           |                       |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                        |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------|--|
| CERTIFICATE OF COMPLIANCE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  | OIL CONSERVATION DIVISION                                                              |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.                                                                                                                                                                                                                                                                                                                                                                       |  | APPROVED <u>12/21/1981</u>                                                             |  |
| <br>Division Production Supervisor<br>(Title)<br>12/18/81<br>(Date)                                                                                                                                                                                                                                                                                                                                                                                                                      |  | BY <u>Original Signed by FRANK T. CHAVEZ</u><br>SUPERVISOR DISTRICT # 3<br>TITLE _____ |  |
| This form is to be filed in compliance with RULE 110A.<br>If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.<br>All sections of this form must be filled out completely for all able on new and recompleted wells.<br>Fill out only Sections I, II, III, and VI for changes of new well name or number, or transporter, or other such change of credit.<br>Separate Forms C-104 must be filed for each pool in multi completed wells. |  |                                                                                        |  |