

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
|---------------------|-----|
| APPROVED | |
| DATE | |
| BY | |
| TITLE | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| OPERATOR | GAS |
| REGISTRATION OFFICE | |
| REGULATOR | |

Lobo Production

Address PO Box 2364 Farmington, New Mexico 87499

Reason(s) for filing (Check proper box)

| | | | |
|---------------------|-------------------------------------|---------------------------|--------------------------|
| New Well | <input type="checkbox"/> | Change in Transporter of: | |
| Recompletion | <input type="checkbox"/> | Oil | <input type="checkbox"/> |
| Change in Ownership | <input checked="" type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> |
| | | Dry Gas | <input type="checkbox"/> |
| | | Condensate | <input type="checkbox"/> |

Other (Please explain)

Add gas transporter

If change of ownership give name
and address of previous owner

R.E. Lauritsen, PO Box 2364, Farmington, NM 87499

DESCRIPTION OF WELL AND LEASE

| | | | | |
|-----------------|----------|--------------------------------|-----------------------|----------------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| Hatch | #1 | Cha Cha Gallup | State, Federal or Fee | Fee |
| Location | | | | |
| Unit Letter | C | 1980 | Feet From The | West |
| Line and | 660 | Feet From The | North | |
| Line of Section | 14 | Township | 29N | Range |
| | | | 15W | NMPM, San Juan |
| | | | | County |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|--|-----------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| Giant Refinery Inc. | Farmington Hwy, Bloomfield, NM 87413 | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| Intrastate Gathering Corp. | 167 Broadway, Suite 2430 | |
| | Denver, Colorado 80202 | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. |
| | C | 14 |
| | | 29N |
| | | 15W |
| | | yes |
| | | June 1983 |

This production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

| | | | | | | | | |
|------------------------------------|-----------------------------|-----------------|--------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.R.T.D. | | | | | |
| Deviation (DF, RKB, RT, CR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | | | | | |
| Deviation | Depth Casing Shoe | | | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | |
| | | | |
| | | | |

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 allowable for this depth or be for full 24 hours)

| | | | |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |

WELL

| | | | |
|-----------------------------------|---------------------------|---------------------------|-----------------------|
| Flow Prod. Test-MCF/G | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pistol, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

CERTIFICATE OF COMPLIANCE

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.

(Signature)

R. E. Lauritsen

(Title)

2-8-84

(Date)

OIL CONSERVATION DIVISION

APR 08 1984

APPROVED _____, 19____

BY _____

TITLE _____ SUPERVISOR DISTRICT # 3

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 allow-
able 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 condition.
Separate Forms C-104 must be filed for each pool in multiply