Submit 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Arlesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III IXXX Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator FULLER PETROLEUM, INC. 3004513140 Address 500 Throckmorton, Suite 2020, Fort Worth, Texas 76102 (817) <u>336-2020</u> Other (Please explain) Reason(s) for Filing (Check proper box) Change in Transporter of New Well Dry Gas Recompletion Effective October 1, 1991 Casinghead Gas Condensate M Change in Operator If change of operator give name and address of previous operator C. M. PAUL, P. O. Box 240, Farmington, NM 87499 II. DESCRIPTION OF WELL AND LEASE Kind of Lease Lease No. Well No. Pool Name, Including Formation Sixten Fooderal And Peo STANDARD NICKELS 1 Basin Dakota Location Feet From The North Line and 1850 Feet From The 1850 G٠ Unit Letter . San Juan 21 Township 31N Range 13W NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil Giant Refining, Inc. P. O. Box 256, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas X P. O. Box 1492, El Paso, TX 79978 El Paso Natural Gas Co. Is gas actually connected? When ? Rge. Unit Twp. If well produces oil or liquids, Sec. Yes give location of tanks. 21 | 31N 13W G If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Diff Res'v Oil Well New Well Workover Deepen Plug Back Same Res'v Gas Well Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT HOLE SIZE CASING & TUBING SIZE V. TEST DATA AND REQUEST FOR ALLOWABLE (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.) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test 唇角色 Clok Size Casing Pressure Length of Test Tubing Pressure Gas- MCF Water - Bbls. Oil - Bbls. Actual Prod. During Test **GAS WELL** Gravity of Condensate Bbls. Condensale/MMCF Actual Prod. Test - MCI/D Length of Test Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief. Date Approved Original Signed by FRANK T. CHAVEZ By __ SignaMARK Vice President-Operations SUPERVISOR DISTRICT #3 Title 817-336-2020

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance
- All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes. et a see each mont in multiply completed walls