SANTA FE FILE AND U.S.G.5 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS AND OFFICE OIL IRANSPORTER GAS OPERATOR PRORATION OFFICE Operator Mewbourne Oil Company P. O. Box 7698, Tyler, Texas 75711 Reason(s) for filing (Check proper box) Other (Please explain) New Well Dry Gas Recompletion Casinghead Gas X Condensate Change in Ownership If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE Per Nation Including Formation ell No. John Etcheverry, Jr. 1 Tres Papalotes Penn Location 1980 Feet From The South Line and 660 14S Range 34E , NMPM Township Line of Section II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil 3411 Knoxville Ave., Lubbock, Tx. 79415 Amoco Pipeline Company Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas 211 North Colorado, Midland, Tx. 79701 Is gas actually connected? When J. L. Davis Sec. Twp. Is gas actually connected? Unit If well produces oil or liquids, give location of tanks. ! 29 14S : 34E yes L If this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Gas Well Workover Oil Well Designate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth Date Spudded Top O!1/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, CR, etc.) Perforations TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE DEPTH SET HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Preducing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Cosing Pressure Tubing Pressure Length of Test Water - Bble. Actual Prod. During Test OII - Bbls. **GAS WELL** Bbls. Condensate/MMCF Actual Prod. Test-MCF/D Length of Test Cosing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) I. CERTIFICATE OF COMPLIANCE

certify that the rules and regulations of the Oil Conservation

Secretary

Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Muy

(Date)

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1986

Engl

May 27,

NEW MEATUR DIE CONSERVATION COMM REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and . Effective 1-1-65

Lease No.

County

Fee

Plug Back Same Resty, Diff. Resty.

SACKS CEMENT

West

Le.a

P.B.T.D.

Tubing Depth

Choke Size

Gae - MCF

Choke Sixe

Gravity of Condensate

Depth Casing Shoo

State, Federal or Fee

Feet From The __

Deepen

OIL	CONSERVATION	COMMISSION
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APPROVED.	JUN	1936	, 19			
ORIGINAL SIGNED BY JERRY SEXTEN						
BY BISTMCT I SUFERVISOR						
W	BISTINC! 130	LEWAINER				

This form is to be filed in compliance with RULE 1104.

TITLE _

If this is a request for allowable for a newly drilled or deepe 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.

Fill out only Sections I, II. III, and VI for changes of owner, ell name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.