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| SANTA FE          |       |              | <u> </u> |
| FILE              |       |              | !        |
| U.S.G.S.          |       |              |          |
| LAND OFFICE       |       |              |          |
| TRANSPORTER       | OIL   |              |          |
|                   | GAS   |              |          |
| OPERATOR          |       |              |          |
|                   |       | <del> </del> |          |

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|             | SANTA FE<br>FILE   |   | CONSERVATION COMMISSION<br>TFOR ALLOWABLE<br>AND  | Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65  |  |  |
|-------------|--|---|---|---|--|--|
|             | U.S.G.S.  LAND OFFICE  TRANSPORTER  GAS  GAS   | AUTHORIZATION TO T  | RANSPORT OIL AND NATURA   | AL GAS  |  |  |
| I.          | Operator   |   |   |   |  |  |
|             | J. R. CONE   |   |   |   |  |  |
|             | P. O. BOX 8  |   |   |   |  |  |
|             | Reason(s) for filing (Check proper b   | Change in Transporter of:   | Other (Please explain)  | f. com  |  |  |
|             | Recompletion Change in Ownership   | Oil Dry   | Gas CHANGE OF   | OPERATOR  |  |  |
|             | If change of ownership give name and address of previous owner   | FORMERLY OPERATED   | BY TENNECO OIL COMP   |   |  |  |
| II.         | DESCRIPTION OF WELL ANI  | D LEASE   |   |   |  |  |
|             |  | Well No. Pool Name, Including 2 JALMAT                                      |   | ease Lease No. deral or Fee State $E-396-8$   |  |  |
|             | Unit Letter P 9  | 90 Feet From The South  |   | om The East   |  |  |
|             | 25   |   | 35E , NMPM,   | LEA County  |  |  |
| III.        | Name of Authorized Transporter of C  | RTER OF OIL AND NATURAL G   | Asidress (Give address to which as  | proved copy of this form is to be sent)   |  |  |
|             | Cities Service Ji  | 1 Company   | partlesville ()   | klaboma   |  |  |
|             | Name of Authorized Transporter of C<br>Phillips Petroleum  | ***   | Address (Give address to which ap   | proved copy of this form is to be sent)   |  |  |
|             | If well produces oil or liquids,   | Unit Sec. Twp. Rge.   | Partlesville, () Is gas actually connected?   | Klahoma<br>When   |  |  |
|             | give location of tanks,  | P   25   225   35   |   | 1-11-57   |  |  |
|             |  | cosember 1, 1967 and commission's 1 1967. Hereafter, to dell No. 2 to the C | etter of approval,<br>filler will be eas  | do e<br>Leusted   |  |  |
|             | VIII WEGG  |   |   |   |  |  |
|             | Date First New Oil Run To Tanks  | Date of Test  | Producing Method (Flow, pump, gas   | lift, etc.)   |  |  |
| ļ           | Length of Teat   | Tubing Pressure   | Casing Pressure   | Choke Size  |  |  |
| ĺ           | Actual Prod. During Test   | Oil-Bhis.   | Water - Bbis.   | Gas - MCF   |  |  |
| •           | GAS WELL   |   |   |   |  |  |
| ſ           | Actual Prod. Test-MCF/D  | Length of Test  | Bbls. Condensate/MMCF   | Gravity of Condensate   |  |  |
|             | Testing Method (pitot, back pr.)   | Tubing Pressure (Shut-in)   | Casing Pressure (Shut-in)   | Choke Size  |  |  |
| /I. (       | CERTIFICATE OF COMPLIAN  | CE  | OII CONSERV   | /ATION COMMISSION   |  |  |
| O'L OGRACIA |  |   |   | VATION COMMISSION   |  |  |
| (           | I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. |   |   |   |  |  |
|             |  |   | TITLE   |   |  |  |
|             | 1 h. 6.51  | )<br>[:14]  | 11  | This form is to be filed in compliance with RULE 1104.  |  |  |
| <br>        | ENGINEER (Sten   | ature)  | If this is a request for all well, this form must be accompant tests taken on the well in acc       | pwable for a newly drilled or deepened panied by a tabulation of the deviation ordance with RULE 111.                 |  |  |
| (Title)     |  |   | All sections of this form must be filled out completely for allowable on new and recompleted wells. |   |  |  |
| •           | OCTOBER 24, 1967   | ite)  | Fill out only Sections I, well name or number, or transpo   | II, III, and VI for changes of owner, orter, or other such change of condition, at be filed for each pool in multiply |  |  |