Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

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 1000 Rio Brazos Rd., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| I. | T | OTRA | NSPO | ORT OIL | AND NA | TURAL GA | | | | | |
|--|---|--------------|-------------|--------------|-----------------------------------|--|----------------|-------------------------------------|-----------------------|--------------|--|
| Operator | 1 | | | | | | | VPI No. | - 25 | ~7O | |
| United Gas Search, Inc. Address | | | | | | | 30- | -025– 225 | 70 255 | 5/8 | |
| c/o Oil Reports & Gas | Service | s, Inc | ., B | ox 755 | , Hobbs, | NM 882 | 41 | | | | |
| Reason(s) for Filing (Check proper box) | | | | | | es (Please expla | zin) | | | | |
| New Well | • | Change in | - | | | | | | | | |
| Recompletion | | | | | | | | | | | |
| If change of operator give name | | | | | | | | | | | |
| and address of previous operator | | | | | ····· | | - 1 | | | | |
| II. DESCRIPTION OF WELL | | SE | | | | | 1 | | | | |
| Lease Name | Well No. Pool Name, Including | | | | - | | | nd of Lease Lease No. **Example 10 | | | |
| Stemi-kyan - South Denatu gueen - | | | | | | | | | | | |
| Location Unit Letter O | : 660 Feet From The South Line and 1980 Feet From The East Line | | | | | | | | | | |
| Section 11 Township 26S Range 37E , NMPM, Lea County | | | | | | | | | | | |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | | | | | | | | | | |
| Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent) | | | | | | | | | | | |
| Scurlock Permian Corp. | | | | | | P. O. Box 1183, Houston, TX 77251-1183 | | | | | |
| Name of Authorized Transporter of Casinghead Gas Or Dry Gas | | | | | | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Sid Richardson Carbon & Gasoline Co. | | | | | | 1st City Bank Tower, 201 Main St, FtWorth TX | | | | | |
| | | | | | Is gas actually connected? When ? | | | | | | |
| | • | | | 37E | Ye | | | 9/1/ | 88 | | |
| If this production is commingled with that f IV. COMPLETION DATA | rom any other | r lease or p | ool, give | commingi | ing order num | Der: | | | | | |
| | | Oil Well | G | as Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v | |
| Designate Type of Completion - | | L | <u>_</u> Ļ_ | | Morel Doorb | <u>l</u> | | ,l | | <u> </u> | |
| Date Spudded Date Compl. Ready | | | to Prod. | | Total Depth | | | P.B.T.D. | | | |
| Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | | | Top Oil/Gas | Pay | | Tubing Depth | | | |
| Perforations | | | | | | Depth Cas | | | | ng Shoe | |
| | | IDDIG (| O 4 OF 1 | C AND | | VA DECOR | | | | | |
| LIOU E 0170 | TUBING, CASING AND | | | | | | | | SACKS CEMENT | | |
| HOLE SIZE | HOLE SIZE CASING & TUBING SIZE | | | | | DEPTH SET | | GAORO OZIVIZIVI | | | |
| | | | | | ··········· | | -: | | | | |
| | | | | | | | | | | | |
| | 1 | | | | , | | | | | | |
| V. TEST DATA AND REQUES' OIL WELL (Test must be after re | | | | l and must i | he equal to or | exceed top allo | wahle for this | depth or he fo | r full 24 kour | ·r.) | |
| Date First New Oil Run To Tank | Date of Test | | , 1000 01 | | | thod (Flow, pu | | | . , | | |
| | | | | | Casing Pressure Choke Size | | | | | | |
| Length of Test | Tubing Pressure | | | | Casing Pressure | | | Choice Size | | | |
| Actual Prod. During Test | Oil - Bbls. | | | | Water - Bbis. | | | Gas- MCF | | | |
| GAS WELL | | | | <u></u> | | | | | | | |
| Actual Prod. Test - MCF/D | Length of Te | est | | | Bbls. Conden | mte/MMCF | | Gravity of Co | ndensate | | |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | | | | Casing Pressure (Shut-in) | | | Choke Size | | | |
| | | | | | | | | | | | |
| VI. OPERATOR CERTIFICA | | | | CE | | DIL CON | SERVA | TION F | NIVISIO | N | |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above | | | | | | | UL!!! | | ,, , , , , , , | • • | |
| Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | | | | Data Aparavad | | | | | | |
| · , ` | | | | | | Date Approved | | | | | |
| Warne Lakes | | | | | Orig. Signed by | | | | | | |
| Signature | | | | | By Paul Kautz Geologist | | | | | | |
| Donna Holler Agent Printed Name Title | | | | | | | | | | | |
| 10-31-91 | 50! | 5-393-2 | 2727 | | Title. | ······································ | | · | | | |
| Date | | Telepi | hone No | . | I | | | | | | |

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

NOV WAR TO 1