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| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

| | |
|---|---|
| Operator Delaware Apache Corporation | |
| Address 1720 Wilco Bldg. Midland, Texas 79701 | |
| Reason(s) for filing (Check proper box) | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| Other (If gas explain) GAS MUST NOT BE PLACED AS PR 3/14/71 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED. | |

If change of ownership give name
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOR
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|------------------------|
| Lease Name Midwest Federal | Well No. 1 | Pool Name, including Formation Vada Penn R-4119 | Kind of Lease State, Federal or Fee Federal | Lease No. 880240872 |
| Location | | | | |
| Unit Letter J, 1960 Feet From The South Line and 1930 Feet From The East | | | | |
| Line of Section 5 Township 9S Range 34E, NMPM, Lea County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|---|--|-----------|------------|-------------|----------------------------------|-------------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mobil Pipeline Co. P. O. Box 900, Dallas, Texas 75221 | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| P. O. Box 1539, Tulsa, Okla. 74101 | | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 5 | Twp. 9S | Rge. 34E | Is gas actually connected? no | When approx. 2-15-71 |

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

IV. COMPLETION DATA

| | | | | | | | | |
|--|--|----------|-------------------------|----------|---------------------------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well XX | Gas Well | New Well XX | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 11-23-70 | Date Compl. Ready to Prod. 1-13-71 | | Total Depth 9715 | | P.B.T.D. | | | |
| Elevations (DF, RKB, RT, GR, etc., Gr 4230.5' | Name of Producing Formation Bough "C" | | Top Oil/Gas Pay 9649 | | Tubing Depth 9662' | | | |
| Perforations 9649-9666 | | | | | Depth Casing Shoe 9715 | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 15" | 11-3/4" | | 334 | | 350 SX | | | |
| 11" | 3-5/8" | | 3915 | | 375 | | | |
| 7-7/8" | 5-1/2" | | 9715 | | 350 | | | |
| 7-7/8" | 2-3/8" | | 9662' | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL 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 1-14-71 | Date of Test 1-15-71 | Producing Method (Flow, pump, gas lift, etc.) Pump 4" x 2-3/3" x 2-3/8" | |
| Length of Test 24 hrs | Tubing Pressure Hydraulic | Casing Pressure | Choke Size |
| Actual Prod. During Test 938 bbls. | Oil - Bbls. 49 | Water - Bbls. 889 | Gas - MCF 25 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| 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 |

VI. CERTIFICATE OF COMPLIANCE

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.

Bonnie Husband
(Signature)

Production Clerk

(Title)
1-15-71
(Date)

OIL CONSERVATION COMMISSION

APPROVED JAN 20 1971, 19
BY
TITLE SUPERVISOR DISTRICT

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 allowable 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 completed wells.

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JAN 16 1971

OIL CONSERVATION COMAL
NORTH H. M.