

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

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

| | |
|---------------------|--|
| OFFICE | |
| FOR | |
| OPERATIONS | |
| CONSTRUCTION | |
| REGISTRATION OFFICE | |

Minerals, Inc.

P. O. Box 1320, Hobbs, New Mexico 88240

Reason(s) for filing (Check proper box)

| | | | |
|---------------------|--------------------------|---------------------------|-------------------------------------|
| New Well | <input type="checkbox"/> | Change in Transporter of: | |
| Recompletion | <input type="checkbox"/> | Oil | <input checked="" type="checkbox"/> |
| Change in Ownership | <input type="checkbox"/> | Castigated Gas | <input type="checkbox"/> |

(Other, please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|-----------------|----------|--------------------------------|-----------------------|--------------------|
| Lease Name | Well No. | Pool Name, including Formation | Kind of Lease | Lease No. |
| Bass State | 4 | Salt Lake | State, Federal or Fee | E 5231 |
| Location: | | | | |
| Unit: Letter | K | 2310 Feet From The | South | 1980 Feet From The |
| | | | West | |
| Line of Section | 18 | Township | 20S | Range |
| | | | 33E | 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"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Navajo Crude Oil Purchasing Co. | N. Freeman Ave., Artesia, New Mexico 88210 | | | | | |
| Name of Authorized Transporter of Castigated Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| | | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Range. | Is gas actually connected? | When |
| | C | 18 | 20S | 33E | No | |

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

IV. COMPLETION DATA

| | | | | | | | |
|------------------------------------|-----------------------------|---------------|---------------|--------|-------------------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | Re-Completion | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded | Date Compl. Ready to Prod. | Test Depth | | | P.B.T.D. | | |
| Elevations (DF, RKB, RT, CR, etc.) | Name of Producing Formation | Test Interval | | | Tubing Depth | | |
| Perforations | | | | | Depth Casing Shoe | | |
| TUBING, CASING, AND CEMENT DATA | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | | SAGD/C | | |
| | | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

| | | |
|---------------------------------|-----------------|--|
| Date First New Oil Run To Tanks | Date of Test | Production (Bbls./Day, Pump, Gas Lift, etc.) |
| Length of Test | Tubing Pressure | Choke |
| Actual Prod. During Test | Oil-Bbls. | Per-MCF |

GAS WELL

| | | |
|----------------------------------|-----------------------------|---------------------|
| Actual Prod. Test-MCF/D | Length of Test | Grav. of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (Static-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.

Da Moody
 (Signature)
Manager of Operations & Construction
 (Title)
 9-18-75
 (Date)

OIL CONSERVATION COMMISSION

SEP 18 1975

Approved by _____, 19____

BY _____
 John Runyan
 Geologist

This form is to be filed in compliance with RULE 1104.
 If a well is requested 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, transporter or other conditions of production.