

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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The Superior Oil Company

P.O. Box 3901, Midland, Texas 79702

Reason(s) for Filing (Check proper box) Other (Please explain)

New Well Change in Transporter of:

Recompletion Oil Dry Gas

Change in Ownership Casinghead Gas Condensate

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name: Superior Well No.: 1 Position (including Township): H. Lynch Morrow Kind of Lease: State Lease No.: L-5145

Operator: Gulf State Com.

Location: Unit Letter G; 1980 Feet From The North Line and 1980 Feet From The East Line of Section 32 Township 20S Range 34E N.M.P.M. 1980 Lea 1980 Cont.

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate : The Permian Corp. Address (Give address to which approved copy of this form is to be sent): P. O. Box 1183 Houston, Texas

Name of Authorized Transporter of Casinghead Gas or Dry Gas : Llano, Inc Address (Give address to which approved copy of this form is to be sent): Box 1320, Hobbs NM 88240

If well produces oil or liquids, give location of tanks: Unit G Sec. 32 Twp. 20S Rge. 34E Is gas actually connected? Yes When: 5/11/82

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

COMPLETION DATA

| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Well | Other |
|--|---|-------------------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Date Spudded <u>8/1</u> <u>1/30/82</u> | Date Compl. Ready to Prod. <u>7/22/81</u> | Total Depth <u>14,076'</u> | P.E.P.D. <u>13,838'</u> | | | | | |
| Elevation (D.F., M.F., A.F., G.S., etc.) <u>3736' GR</u> | Name of Producing Formation <u>Morrow</u> | Top of Gas Cap <u>13,650'</u> | Working Depth <u>13,484'</u> | | | | | |
| Penetrations <u>13,650' - 13,660'</u> | | Depth Casing shoe | | | | | | |

TUBING, CASING AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH FEET | SACKS CEMENT |
|----------------|----------------------|----------------|--------------|
| <u>17 1/2"</u> | <u>13 3/8"</u> | <u>1,755'</u> | <u>1,500</u> |
| <u>12 1/2"</u> | <u>9 5/8"</u> | <u>5,300'</u> | <u>2,210</u> |
| <u>8 1/2"</u> | <u>5 1/2"</u> | <u>14,076'</u> | <u>775</u> |

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be run in recovery of total volume of fluid oil and must be equal to or exceed top of oil column)

Date First New Oil Run To Tanks: 5/14/82 Date of Test: 5/14/82 Producing Interval (From, To, Gas, etc.): 13,650' - 13,660'

Length of Test: 24 hours Testing Pressure: 2600 psi Spring Pressure: 36 psi Casing Pressure (Start-End): 36 - 2600 psi

Actual Prod. During Test: 53.5 bbl Oil: 16/64" Water: 0 bbl Gas: 0 bbl

GAS WELL

Actual Prod. Test: 53.5 bbl Length of Test: 24 hours P.E.P.D. (Start-End): 13,650' - 13,660' Quantity of Condensate: 16/64"

Testing Method (Direct, Back, etc.): Back Pressure Tubing Pressure (Start-End): 2600 psi Casing Pressure (Start-End): 36 - 2600 psi Casing Size: 16/64"

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

G. E. Tate G. E. Tate
Production Superintendent

5/14/82

OIL CONSERVATION DIVISION

APPROVED: MAY 21 1982

BY: [Signature]

TITLE: Production Superintendent

This form is to be filed in compliance with RULE 100.

If this well is not for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the covariate tests taken on this well in accordance with RULE 111.

All covariate tests for a well must be filled out completely for all covariate tests and values.

This form is to be filed in compliance with RULE 100.