

REQUEST FOR ALLOWABLE AND

TRANSPORT OIL AND NATURAL GAS

RECEIVED BY O. C. D. ARTESIA, OFFICE NOV 08 1984

TABLE FILE U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR PRODUCTION OFFICE

Operator JFG ENTERPRISE

Address P.O. Box 100, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box) New Well, Recompletion, Change in Ownership, Change in Transporter of Oil, Gas, Casinghead Gas, Condensate

Other (Please explain)

If change of ownership give name and address of previous owner Stamford Natural Resources, Group 1980-1, c/o S & I Operating Company P.O. Box 2249, Wichita Falls, Texas 76307

DESCRIPTION OF WELL AND LEASE Lease Name, Well No., Pool Name, Kind of Lease, Location, Line of Section, Township, Range, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil, Address, Name of Authorized Transporter of Casinghead Gas, Address, If well produces oil or liquids, give location of tanks

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

COMPLETION DATA Designate Type of Completion, Date Spudded, Date Compl. Ready to Prod., Total Depth, P.B.T.D., Elevations, Name of Producing Formation, Top Oil/Gas Pay, Tubing Depth, Perforations, Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD Table with columns: HOLE SIZE, CASING & TUBING SIZE, DEPTH SET, SACKS CEMENT

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)

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date First New Oil Run To Tanks, Date of Test, Producing Method, Length of Test, Tubing Pressure, Casing Pressure, Choke Size, Actual Prod. During Test, Oil-Bbls., Water-bbls., Gas-MCF

Handwritten notes: Posted 10/31/84, DP

GAS WELL Actual Prod. Test-MCF/D, Length of Test, Bbls. Condensate/MMCF, Gravity of Condensate, Testing Method, Tubing Pressure, Casing Pressure, Choke Size

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. Agent November 7, 1984

OIL CONSERVATION COMMISSION APPROVED NOV 16 1984 Original Signed By Leslie A. Clements Supervisor District II 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 deviate 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.