

C.S.		
EXPORTER	OIL	
	GAS	
EXPORTER		
EXPORTER		

AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Chace Oil Company, Inc.  
313 Washington SE, Albuquerque, New Mexico 87108

Well	<input type="checkbox"/>	Change in Transporter of:	
Completion	<input type="checkbox"/>	Oil	<input checked="" type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>
		Dry Gas	<input type="checkbox"/>
		Condensate	<input type="checkbox"/>

Other (Please explain)

Change of ownership give name  
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Jicarilla
Jicarilla Tribal Contract 47	5	South Lindrith Gallup Dakota	State, Federal or Fee	Indian

Unit Letter 'F' : 1890 Feet From The North Line and 1900 Feet From The West

Line of Section 11 Township 23N Range 4W . NMPM Rio Arriba

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Signature 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)
Petro Source Corporation	7443 E. Dreyfus, Scottsdale, AZ 85260
Signature of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be)
El Paso Natural Gas Company	P. O. Box 1492, El Paso, TX 79978

Well produces oil or liquids.	Unit	Sec.	Top.	Pgs.	Is gas actually connected?	When
Location of tanks.	F	11	23N	4W	Yes	3/2/84

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	Some Rest.
Spudded							
Drill Stem Completion (D.S.C.)							
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TUBING, CASING, AND CEMENTING RECORD

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 off and must be equal to or greater than for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shot-in)	Casing Pressure (Shot-in)	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.

Frank Walker

Vice President Production

(Title)

November 30, 1987

OIL CONSERVATION COMMISSION

APPROVED

BY

TITLE

SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 11. If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 11. All sections of this form must be filled out complete on new and recompleted wells. Fill out only Sections I, II, III, and VI for change of transporter, or other such change.