ENERGY AND MINERALS DEPARTMENT

| TUT AND WINYER | יאנט נ | JC. IT A | <u> </u> |
|------------------|----------|----------|----------|
| 00 00 totige 101 | * 14 * * | | |
| DISTRIBUTIO | DN | | |
| BANTA PE | | | |
| FILE | | | |
| U.S.G.S. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | GAS | | |
| OPERATOR | | | |
| PROBATION OFFICE | | | |

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

| | U.S.U.S. LAND OFFICE THANSPORTER OIL. GAS OPERATOR PROBATION OFFICE | | OR ALLOWABLE AND SPORT OIL AND NATURAL GAS | | | | |
|-----|---|--|--|---|--|--|--|
| | Operator APACHE CORPORATION | | | | | | |
| | 1700 LINCOLN, #4900, DENVER, COLORADO 80203-4549 | | | | | | |
| | | Reason(s) for filing (Check proper box) Other (Please explain) | | | | | |
| | New Well Recompletion Change in Ownership X | Change in Transporter of: Oil Dry C Casinghead Gas Condo | Gas | | | | |
| | If change of ownership give name and address of previous owner | Cotton Petroleum Corpor | ation, 3773 Cherry Creek | Drive No., #750, Denver | | | |
| п | DESCRIPTION OF WELL AND | Veil No. Fool Name, Including | Formation Kind of Lea | | | | |
| | APACHE | | \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \ | al or Fee FEDERAL 126 | | | |
| | Location Unit Letter C : 90 | OO Feet From The North Li | ine andFeet From | TheWest | | | |
| | Line of Section 14 To | ownship 24N Range | 4W , NMPM, RIO | ARRIBA County | | | |
| 111 | DESIGNATION OF TRANSPOR | RTER OF OIL AND NATURAL G | AS Address (Give address to which appro | oved copy of this form is to be sent) | | | |
| | Name of Authorized Transporter of Co | asinghead Gas or Dry Gas 🔼 | Address (Give address to which appro | oved copy of this form is to be sent) | | | |
| | EL PASO NATURAI | GAS Unit Sec. Twp. Rge. | P.O. BOX 1492 - EL PA | SO, TX 79978 | | | |
| | If well produces oil or liquids, give location of tanks. | 24N 4W | YES ! | nen | | | |
| IV. | If this production is commingled w | ith that from any other lease or pool, | give commingling order number: | | | | |
| | Designate Type of Completi | on - (X) Cil Well Gas Well | New Well Workover Deepen | Plug Back Same Res'v. Diff. Res | | | |
| | Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oll/Gas Pay | Tubing Depth | | | |
| | Perforations | | | Depth Casing Shoe | | | |
| | HOLE SIZE | TUBING, CASING, AND | D CEMENTING RECORD DEPTH SET | SACKS CEMENT | | | |
| | | | | | | | |
| | | | • | | | | |
| v. | TEST DATA AND REQUEST F | OR ALLOWABLE (Test must be a able for this de | | and must be equal to or exceed top allc | | | |
| | Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas li | fi, etc., | | | |
| | Length of Test | Tubing Pressure | Casing Pressure | Choke Size | | | |
| | Actual Prod. During Test | Oil-Bbls. | Water-Bbis. OCT2 4 1046 | Gds - MCF | | | |
| | GAS WELL | | Market State of the State of th | 7 1 | | | |
| 1 | Actual Prod. Teet-MCF/D | Length of Test | Bbis. Condensate/MMCF | Gravity of Condensate | | | |
| | Testing Method (pitot, back pr.) | Tubing Pressure (Shnt-in) | Coming Pressure (Shut-in) | Chake Size | | | |
| VI. | CERTIFICATE OF COMPLIAN | CE | OIL CONSERVAT | TION DIVISION | | | |
| | I hereby certify that the rules and r Division have been complied with | regulations of the Oil Conservation and that the information given | APPROVED | PGT 30) 1986 —— | | | |
| í | above is true and complete to the best of my knowledge and belief. Annal M Annal M Signature | | BY | SUPERVISOR DISTRICT # 3 | | | |
| - | | | This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepens well this form must be accompanied by a tabulation of the deviation | | | | |
| _ | Moderation | mer | tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow | | | | |
| _ | 10/13/75 | | able on new and recompleted wells. | | | | |
| - | (De | (e) | well name or number, or transport | er, or other such change of condition | | | |

Separate Forms C-104 must be filed for each pool in multiple completed wells.

VI. 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. |
|--|
| LANGER COMMENT |
| (Signature) |

(Title)

(Dete)

OIL CONSERVATION DIVISION

| APPROVED | - 100T/2)0 19 96 |
|----------|-------------------------|
| | Trank). Javes |
| | SUPERVISOR DISTRICT # |

This form is to be filed in compliance with NULE 1104.

If this is a request for allowable for a newly drilled or deepens 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 allow able 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 multipl