STATE OF HEW MEXICO Form C-104 Revised 10-1-78 IGY AND MIBITUALS DEPARTMENT OIL CONSERVATION DIVISION P. O. BOX 2088 DISTRIBUTION SANTA FE, NEW MEXICO 87501 -----7 1L E U.1.0.4. LAND DEFKT REQUEST FOR ALLOWABLE AND TAANSPORTER . AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PROMATION DEFICE Operator ECEIVED Petro-Lewis Corporation Address Box 16200 Lubbock, Texas 79490 MAR 05 1984 Other (Please explain) Reason(s) for liling (Check proper box) Now Well OIL CON. DIV. Oil Dry Gos Recompletion Condensate Castnahead Gas Change In Ownership I change of ownership give name ind address of previous owner. DESCRIPTION OF WELL AND LEASE Kind of Lease Leose No. Well No. Pool Name, Including Formation Leose Non \$F-080566 SKAK, Foderal AFFAF 7A Ruddock Blanco Mesaverde Location Feel From The North Line and 1100 1990 East Unit Letter County Line of Section 3 25 North Range 3W , NMPM, Rio Arriba Township DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil or Condensate [X] P.O. Box 1183 Houston, Texas 77001 Permian Corporation Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas X P.O. Box 1492 El Paso, Texas 79978 El Paso Natural Gas Company When Twp. Roe. Is gas actually connected? Unit If well produces oil or liquids, 125N 1 3 , 3W • H n/a give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Same Resty. Diff. Res Plug Becs Gas Well Workover Deepen New Well Oil Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spuddes Tubing Depth Top OII/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc., Depth Cosing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE (Test must be after recovery of total valume of load oil and must be equal to or exceed top alloable for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tonks Date of Test Choke Size Cosine Pressure Tubing Pressure Length of Tes: Woler - Bbls. OII-Bbis. Actual Pres. During Test GAS WELL Gravity of Condensate Bbla. Condensore/MMCF Actual Fice. Tool-MOFID Length of Test Casing Freeswe (Ehut-in) Choke Sixe Tubing Piecewe (shat-in) Testing Methes (pirot, back pr.) OIL CONSERVATION DIVISION CERTIFICATE OF COMPLIANCE 1984 I hereby certify that the rules and regulations of the Oll Conservation APPROVEST Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. SUPERVISOR DISTRICT # 4 TITLE _ This form is to be filed in compliance with nucle 1104, If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a labulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allo-Accounting/Revenue Production Superviso: able on new and recompleted wells. (Tule) Fill out only Sections I. II. III. and VI for changes of names well name or number, or transporter, or other such change of condities 2/28/84

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(Date)