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| SANTA FE               |     | _/ |   |
| FILE                   |     | 1  |   |
| U.S.G.S.               |     |    |   |
| LAND OFFICE            |     |    |   |
| TRANSPORTER            | OIL | 1  |   |
|                        | GAS | /  |   |
| OPERATOR               |     | 3  |   |
| PRORATION OFFICE       |     |    |   |

| DISTRIBUTION  | NEW MEXICO OIL CONSERVATION COMMISSION  REQUEST FOR ALLOWABLE  Supersedes Old C-104 and C |  |  |  |
|---|---|--|--|--|
| SANTA FE  | REQUEST FOR ALLOWABLE  AND  Supersedes Old C-104 and C-11  Effective 1-1-85               |  |  |  |
| FILE /  |   | SPORT OIL AND NATURAL GA   | 5  |  |
| LAND OFFICE   |   |  |  |  |
| IRANSPORTER OIL /   |   |  |  |  |
| GAS /   |   |  |  |  |
| OPERATOR 3  |   |  |  |  |
| PRORATION OFFICE  |   |  |  |  |
| SOUTHLAND R   | OYALTY COMPANY  |  |  |  |
| Address   |   |  |  |  |
| P O Drawer 570. Far   | mington, New Mexico 874   | 01   |  |  |
| Reason(s) for filing (Check proper box)                           |   | Other (Please explain)   |  |  |
| New Well  | Change in Transporter of:   |  | AME CHANCE                                 |  |
| Recompletion  | Oil Dry Gas Continuing Gas Condens  | NAME CHANGE  |  |  |
| Change in Ownership   | Cashiqueae ou   |  |  |  |
| and address of previous owner                                     | Aztec Oil & Gas Company,  | P. O. Drawer 570, Farmi  | ngton, New Mexico 37401                    |  |
| I. DESCRIPTION OF WELL AND L                                      | Well No. Pool Name, Including For   | rmation Kind of Lease  | Lease No.                                  |  |
| Lease Name Davis  | 3 Blanco Mes  |  | Fee Federal SF-077648                      |  |
| Location  |   |  |  |  |
| Unit Letter E ; 1650  | Feet From The North Line  | and 990 Feet From Tr   | . West                                     |  |
| Unit Letter   |   | •  |  |  |
| Line of Section 1 Town  | nship 31N Renge   | 12W , NMPM, San Jua  | nn County                                  |  |
|   |   |  |  |  |
| H. DESIGNATION OF TRANSPORT                                       | or Condensate X   | Address (Give address to which approve                                   | d copy of this form is to be sent)         |  |
| Name of Authorized Transporter of Oil                             | C. Consensus at   | P. O. Box 108, Farmingt  | on, New Mexico 87401                       |  |
| Plateau, Inc.   | indhedd Gas To or Dry Gas 🛣   | Address (Give address to which approved copy of this form is to be sent) |  |  |
| Southern Union Gather   | rina  | Fidelity Union Tower, Dallas, Texas 75201                                |  |  |
|   | 'Unit Sec. Twp. P.ge.   | Is gas actually connected? When  | :<br>!                                     |  |
| give location of tanks.   | :   |  |  |  |
| If this production is commingled wit                              | h that from any other lease or pool, g  | give commingling order number:   |  |  |
| V. COMPLETION DATA  | Oil Well Gas Well   | New Well Workover Deepen   | Plug Back   Same Res'v. Diff. Res'v.       |  |
| Designate Type of Completio                                       |   |  | 1  |  |
| Date Spudged  | Date Compl. Ready to Prod.  | Total Depth  | P.B.T.D.                                   |  |
| Date spaces   |   |  |  |  |
| Elevations (DF, RKB, RT, GR, etc.,                                | Name of Producing Formation   | Top Oil/Gas Pay  | Tubing Depth                               |  |
|   |   |  | Depth Casing Shoe                          |  |
| Perforations  |   | J  | -  |  |
|   | THEMS CASING AND  | CEMENTING RECORD   |  |  |
|   | CASING & TUBING SIZE  | DEPTH SET  | SACKS CEMENT                               |  |
| HOLE SIZE   | 1   |  |  |  |
|   |   |  |  |  |
|   |   |  | 1  |  |
|   |   |  | d muse he must be an oltra                 |  |
| V. TEST DATA AND REQUEST F  | OR ALLOWABLE (Test must be a  | feer recovery of total volume of load oil epth or be for full 24 hours)  | and must be equal to or exceed top discoun |  |
| OIT WELL  | Date of Test  | Producing Method (Flow, purp, gas ii)                                    | c art.                                     |  |
| Date First New Oil Run To Tanks                                   | Date 01 1480  |  |  |  |
| 15  | Tubing Pressure   | Casing Pressure  | Chake Sign                                 |  |
| Length of Test  | ·   | JAN 3  | 10/10/10                                   |  |
| Actual Prod. During Test  | ON-Bbis.  | Woter-BEIS. OIL Com  | GIP ANGE                                   |  |
| Autoria   |   | Dist   | 1504.                                      |  |
|   |   | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \                                    | · s' /                                     |  |
| GAS WELL  |   | Bbls. Condensate/MMCF  | Gravity of Condensate                      |  |
| Actual Prod. Test-MOF/D   | Length of Test  | Ed.a. Condensor,   |  |  |
|   | Tubing Pressure (Shnt-in)   | Casing Pressure (Shut-in)  | Choke Size                                 |  |
| Testing Method (pitot, back pr.)                                  | Land Leasure Country  |  |  |  |
|   | ·CE   | OIL CONSERVA   | ATION COMMISSION                           |  |
| VI. CERTIFICATE OF COMPLIAN                                       | ILE .   | IΔN  | 1 2 1978                                   |  |
| descriptions of the Oil Conservation   APPROVED                   |   |  |  |  |
| I hereby certify that the rules and Commission have been complied | with and that the information given   | e and belief. BY   |  |  |
| above is true and complete to th                                  | he best of my knowledge and belief.   |  |  |  |
|   | ./ //   | 11166  |  |  |
|   | W V -   | This form is to be filed in  | compliance with RULE 1104.                 |  |

Manager District Production

(Title) 1-1-78

(Date)

If this is a request for allowable for a newly drilled or deepened 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 allowable 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 multiply completed wells.