

|                    |     |
|--------------------|-----|
| NO COPIES RECEIVED |     |
| DISTRIBUTION       |     |
| SANTA FE           |     |
| FILE               |     |
| U.S.G.S.           |     |
| LAND OFFICE        |     |
| TRANSPORTER        | OIL |
|                    | GAS |
| OPERATOR           |     |
| PRORATION OFFICE   |     |

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

|  |   |
|--|---|
| Operator<br>Koch Exploration Co.               |   |
| Address<br>P.O. Box 2256 Wichita, Kansas 67201 |   |
| Reason(s) for filing (Check proper box)        |   |
| New Well <input checked="" type="checkbox"/>   | Change in Transporter of:   |
| Recompletion <input type="checkbox"/>          | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>               |
| Change in Ownership <input type="checkbox"/>   | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| Other (Please explain)<br>Add ST               |   |

If change of ownership give name  
and address of previous owner

DESCRIPTION OF WELL AND LEASE

|                       |                 |  |  |                      |
|-----------------------|-----------------|--|--|----------------------|
| Lease Name<br>Walker  | Well No.<br>6-R | Pool Name, including Formation<br>Blanco/Picture Cliff | Kind of Lease<br>State, Federal or Fee Federal | Lease No.<br>013688A |
| Location              |                 |  |  |                      |
| Unit Letter<br>0      | 1500            | Feet From The East                                     | Line and 955<br>790                            | Feet From The South  |
| Line of Section<br>13 | Township<br>31N | Range<br>10W   | , NMPM, San Juan County                        |                      |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |
|--|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |
| Plateau Inc  | P.O. Box 108 Farmington, N.M. 87401                                      |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| El Paso  | P.O. Box 1492 El Paso, Tx. 79999   |
| If well produces oil or liquids,<br>give location of tanks.  | Unit Sec. Twp. Rge. Is gas actually connected? When                      |
| 0 13 31N 10W   | Yes Jan. 7, 1981   |

If 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 | Same Res'v. | Diff. Res'v. |
|   |   | XX                           | XX                   |          |        |           |             |              |
| Date Spudded<br>October 9, 1980                         | Date Compl. Ready to Prod.<br>November 13, 1980 | Total Depth<br>3555          | P.B.T.D.<br>3500     |          |        |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.)<br>GR 6590, KB 6002' | Name of Producing Formation<br>Picture Cliff    | Top Oil/Gas Pay<br>3404/3442 | Tubing Depth<br>3500 |          |        |           |             |              |
| Perforations<br>3404-3442                               | Depth Casing Shoe                               |                              |                      |          |        |           |             |              |

TUBING, CASING, AND CEMENTING RECORD

|           |                      |           |              |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 8 3/4     | 7"                   | 224'      | 150 sx.      |
| 6 3/4     | 4 1/2"               | 3533'     | 711 sx.      |
|           | 2 3/8"               | 3435'     |              |

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)

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

GAS WELL

|   |                                  |                                   |                       |
|---|----------------------------------|-----------------------------------|-----------------------|
| Actual Prod. Test-MCF/D<br>1.02 MMCF/D            | Length of Test<br>24 Hr.         | Bbls. Condensate/MMCF<br>1/2 BP/D | Gravity of Condensate |
| Testing Method (pilot, back pr.)<br>Bzck Pressure | Tubing Pressure (shut-in)<br>550 | Casing Pressure (shut-in)<br>550  | Choke Size<br>3/8     |

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.

Thomas J. Gault  
(Signature)  
Operations Manager  
(Title)  
February 3, 1982  
(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 16 1982, 19\_\_\_\_  
BY Original Signed by CHARLES GHOLSON  
DEPUTY OIL & GAS INSPECTOR, DIST. 3  
TITLE \_\_\_\_\_

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 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.