LERGY AND MINERALS DEPARTMENT ** ** ***** DISTRIBUTION SANTAFE # 1L E U \$.U.\$. LAND OFFICE UIL TRANSPORTER OPERATOR PROBATION OFFICE

DIL CONSERVATION DIVISI P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Mobil Producing Texas & New Mexico, Inc. Nine Greenway Plaza, Suite 2700, Houston, Texas 77046 Reason(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: Effective 1-1-85 Ctf Dry Gas Recompletion Change in Ownership Condensate Caringhead Gas If change of ownership give name Superior Oil Company, The, P. O. Box 3901, Midland, Texas 79702 and address of previous owner_____ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Government "10" 1 Scharb - Bone Spring State, Federal or Fee Federal 0554858 Location 660 660 Feet From The South Line and West Feet From The Unit Letter 10 198 Range 35E qiden» .T , NMPM, Lea Line of Section Address (Give address to which approved copy of this form is to be sent) Texas-New Mexico Pipeline P.O. Box 2528, Hobbs, NM 88240 Name of Authorized Transporter of Castinghead Gas 📉 — or Dry Gas 🗀 Address (Give address to which approved copy of this form is to be sent) Phillips Petroleum Company 4001 Penbrook, Odessa, Texas 79762 When Is gas actually connected? If well produces oil or liquids, 19S 35E 9 G Yes 10-27-83 give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: Y. COMPLETION DATA Same ries'v. Diff. Res! Plug Back OIL Well Gas Well New Well Workover Designate Type of Completion - (X) Date Campl. Ready to Prod. Total Depth P.B.T.D. Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT HOLE SIZE CASING & TUBING SIZE DEPTH SET (Test must be after recovery of total volume of load oil and must be equal to or exceed top alloable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Cil Run To Tonks Casing Pressure Choke Size Length of Test Tubing Pressure Gas - MOF Water - Bible. Actual Prod. During Test Cil-Bala. GAS WELL Gravity of Condensate Bbis. Condensate AVMCF Actual Prod. Test-MCF/D Length of Test Tubing Pressure (Shut-in) Cosing Pressure (Shut-in) Chote Size Testing Method (pitot, back pr.) OIL CONSERVATION DIVISION 4. CERTIFICATE OF COMPLIANCE JAN - 2 1985 APPROVED. I hereby certify that the rules and regulations of the Oil Conservation ORIGINAL SIGNED BY JERRY SEXTON Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. DISTRICT | SUPERVISOR BY_ TITLE _ This form is to be filed in compliance with nULE 1104. If this is a request for allowable for a nawly drilled or dee C. R. Sessions mons well, this form must be accompenied by a tabulation of the deviation tests taken on the well in accordance with BUCK 111.

(Signotura) Authorized Agent

(Dute)

December 26, 1984

All sections of this form rest be filled out completely for allow able on new and recompleted walls,

14H out only Sections 1, H. III, and VI for thenges of owns well name or number, or transporter, at other such classic of condition

Superete Lorine Colod must be filled for wech peol in a dilprocedured wells.

RECEIVED

DEC 31 1984

O.C.P. HOBBS O.FICE