Image: Contract of the second seco	AN 111984 O. C. D. INTESIA, OFFICE Well, New Mexico 88201 Leose edero: cr Fee FedNM 14760B
Image: Construction of the second state of the second s	Q, C. D. RIESIA, OFFICE well, New Mexico 88201 Leose ederal cr Fee FedNM 14760B From The West
I.       PROPATION OFFICE         Cperoioi       Slayton Oil Corp.         Address       P. O. Box 2035       Roswell, New Mexico 88201         Reeson(s) for filing (Check proper box)       Other (Please explain)         :ew Well       Change in Transporter of:         Recompletion       Oil       Dry Gos         Change in Ownership give name       Other (Please explain)         if change of ownership give name       Other (Please explain)         If change of ownership give name       Paul Slayton P. O. Box 1936, Ros         II.       DESCRIPTION OF WELL AND LEASE         Lecase Name       Well Nc. Pool Name, Including Formation         Vinion       #1         Comanche S A       State, F         Lecase Name       Well Nc. Pool Name, Including Formation         Union       #1         Comanche S A       State, F         Lecastor       14       Townshif         Unit Letter       D       Godd Feet From The North Line and 330       Feet         Line of Section       14       Townshif       States (Give address to which Na va jo Refining Co.       No. Freeman Ave         Norre of Authorized Transporter of Calingread Gar       er Dry Gas       Address to which No.         None       Incert of Lines.       <	well, New Mexico 88201 Leose ederal cr Fee FedNM 14760B
Coperator       Slayton Oil Corp.         Address       P. O. Box 2035       Roswell, New Mexico 88201         Recson(s) for filing (Check proper box)       Other (Please explain         :ew Weil       Change in Transporter of:         Recson(s) for filing (Check proper box)       Other (Please explain         :ew Weil       Change in Transporter of:         Recson(s) for filing (Check proper box)       Other (Please explain         :ew Weil       Casinghead Gas         Condensate       Other (Please explain         The completion       Oil         Change in Dwnership give name       Cosinghead Gas         end eddress of previous owner       Paul Slayton         P. O. Box 1936, Ros         II       Description         Lecase Name       Well Nc. Pool Name, Including Formation         Lecase Name       #1         Union       #1         Comanche S A       State, F         Lecetion       #1         Unit Letter       D         :       660         North_Line and       330         Feet       North_Line and         Line of Section       14         Townshif       11         Stare of Authorizec Transporter of Ci:       of C	Well, New Mexico 88201 Lease ederai c: Fee Fed NM 14760B
Slayton Oil Corp.         Address         P. O. Box 2035       Roswell, New Mexico 88201         Reeson(s) for filing (Check proper box)       Ditter (Please explain         Lew Well       Change in Transporter of:         Recompletion       Oil       Dry Gos         Change in Ownership (X)       Cosinghead Gos       Condensate         If change of ownership give name end eddress of previous owner       Paul Slayton       P. O. Box 1936, Ros         II       DESCRIPTION OF WELL AND LEASE       Kind of State       State, F         Levento:       Ditestion       #1       Comanche S.A       State, F         Union       #1       Comanche S.A       State, F       State, F         Levento:       Discription       #1       Comanche S.A       State, F         Levento:       Discription       #1       Comanche S.A       State, F         Levento:       Discription       #1       Comanche S.A       State, F         Line of Section       14       Township       State, F       No.       Feet         None       Hownship State       Oil Condensate       No.       Freeman Ave.       No.       No.       Freeman Ave.         None       None       None       Nonect Authoustere	well, New Mexico 88201 Leose edera: c: Fee FedNM 14760B From The West
Address       P. O. Box 2035       Roswell, New Mexico 88201         Resson(s) for filing (Deteck proper box)       Change in Transporter of:       Dther (Please explain         Recompletion       Oil       Dry Gas       Image of the completion       Dther (Please explain         Change in Ownership X       Casinghead Gas       Condensate       Image of ownership give name       Image of ownership give name         end eddress of previous owner       Paul Slayton       P. O. Box 1936, Ros         II       DESCRIPTION OF WELL AND LEASE       Kind of         Lease Name       Well Nc. Pool Name, Including Formation       Kind of         Unit On       #1       Comanche S A       State, F         Lecation.       14       Townshif       State, F       State, F         Line of Section.       14       Townshif       State, F       North_Line and       330       Feet         Line of Section.       14       Townshif       State, F       North_Line and       330       Feet         Nore of Authorized Transporter of Citics       or Chalensate       No. Freeman Ave.       No. Freeman Ave.         Nore of Authorizen Transporter of Casinghead Gar       or Dry Gas       Address to which         Nava jo Refining Co.       No.       No. Freeman Ave.       Noich	well, New Mexico 88201 Leose edera: c: Fee FedNM 14760B From The West
Recoon(s) for filing (Check proper box)       Other (Please explain         :ew Well       Change in Transporter of:       Differ (Please explain         Recompletion       Other (Please explain       Differ (Please explain         Change in Ownership [X]       Casinghead Gas       Condensore         If change of ownership give name and address of previous owner       Paul Slayton       P. O. Box 1936, Ros         II.       DESCRIPTION OF WELL AND LEASE       Well Nc. Pool Name, Including Formation       Kind of State, F         Union       #1       Comanche S.A       State, F         Location:       Unit Letter       D       : 660       Feet From The North Line and 330       Feet         Line of Section       14       Township [1] S       Fange       26 E       NMPM, C         I.       DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       No. Freeman Ave       No. Freeman Ave         Nava jo Refining Co.       No.       No. Freeman Ave       Address to which       No. Refers for address to which         None       Unit       Sec.       Twp.       Feet       no       If well producee cil or liquids, in C       Unit       Sec.       Twp.       Feet       No recet Authorized Transporter of Casinghead Gar cor Dry Gas       Address (Give address to which No ne         If well producee cil	well, New Mexico 88201 Leose edera: c: Fee FedNM 14760B From The West
Recompletion       Oil       Dry Gos         Change in Ownership give name end address of previous owner       Paul Slayton       P. O. Box 1936, Ros         II change of ownership give name end address of previous owner       Paul Slayton       P. O. Box 1936, Ros         II DESCRIPTION OF WELL AND LEASE       Itease Name       Well Nc. Pool Name, Including Formation       Kind of State, F         Lease Name       Well Nc. Pool Name, Including Formation       Kind of State, F         Unit Letter       D       ;       660       Feet From The North Line and 330       Feet         Line of Section       14       Townshif       11       S       Bange 26       E, NMPM, C         I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       None of Authorized Transporter of Oil with or Condensate       Address (Give address to which Na va jo Refining Co.       No. Freeman Ave         None of Authorizen Transporter of Casinghead Gar       or Dry Gas       Address (Give address to which No ne         If well produces cill or liquids, give location, cillaris,       Unit       Sec.       Twp. F.ge.       Is gas actually connected?         If this production is commingled with that from any other lease or pool, give commingling order number       It has production is commingled with that from any other lease or pool, give commingling order number	Lease Lease No ederoi or Fee FedNM 14760B
Change in Ownership X       Casinghead Gas       Condensate         If change of ownership give name end eddress of previous owner       Paul Slayton P, O, Box 1936, Ros         II. DESCRIPTION OF WELL AND LEASE         Lease Name       Well Nc. Pool Name, Including Formation         Kind of Union       #1         Comanche S A       State, F         Lease Name       Well Nc. Pool Name, Including Formation         Union       #1         Comanche S A       State, F         Location       0         Unit Letter       0         State       Feet         Line of Section       14         Township       State         Name of Authorized Transporter of Oil And NATURAL GAS         Name of Authorized Transporter of Oil And NATURAL GAS         Name of Authorized Transporter of Complete of Condensate         Name of Authorized Transporter of Complete Gas         If well produces of tranks.       D	Lease Lease No ederoi or Fee FedNM 14760B
end eddress of previous owner       PAUL Slayton P, O, Box 1936, Ros         ii. DESCRIPTION OF WELL AND LEASE       Iterase Name       Well Nc.; Pool Name, Including Formation         Union       #1       Comanche S A       State, F         Union       #1       Comanche S A       State, F         Unit Letter       D       ;       660       Feet From The North Line and 330       Feet         Line of Section       14       Towniship       11       S       Bange       26       E       NMPM, C         I. DESIGNATION OF TRANSPORTES OF OIL AND NATURAL GAS       Nor e of Authorized Transporter of Oil (and ensate (Give address to which Na va jo Refining Co.       No. Freeman Ave.         Nor e of Authorized Transporter of Casinghead Gas       or Dry Gas       Address (Give address to which No ne         If well produces cill or liquids, (ive location of figures, including formation of figures, including connected?       D       14       11       S 26E       no         If this production is commingled with thet from any other lease or pool, give commingling order number       It wells or commingling order number       State of number of number       State of number	Lease Lease No ederoi or Fee FedNM 14760B
Lease Name       Weil Nc.: Pool Name, Including Formation       Kind of State, F         Union       #1       Comanche S A       State, F         Location:       Unit Letter       D       ;       660       Feel From The North Line and 330       Feel         Line of Section:       14       Township       11 S       Bange 26 E       , NMPM, C         I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Nome of Authorized Transporter of Oil ()       or Condensate ()       Address (Give address to which Na Va jo Refining Co.         Nome of Authorizen Transporter of Casinghead Gas       or Dry Gas       Address (Give address to which None         If well produces cill or liquids, give location of tanks.       Unit       Sec.       Twp.       Fige.       Is gas actually connected?         If this production is commingled with that from any other lease or pool, give commingling order number       D       11 S! 26E       no	ederoi cr Fee FedNM 14760B
Union       #1       Comanche SA       Store, F         Location.       Unit Letter       D       ; 660       Feet From The North Line and 330       Feet         Line of Section       14       Township       11       S       Hange       26       E       , NMPM, C         I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       None of Authorized Transporter of Oil and NATURAL GAS       Address (Give address to which Na va jo Refining Co.       No. Freeman Ave.         None       None       Address (Give address to which None       No. Freeman Ave.         If well produces of or liquids, give location of tarks.       Unit       Sec.       Twp.       Ege.       Is gas actually connected?         If this production is commingled with that from any other lease or pool, give commingling order number       In State from any other lease or pool, give commingling order number	ederoi cr Fee FedNM 14760B
Location.       Unit Letter       D       ; 660       Feet From The North Line and 330       Feet         Line of Section.       14       Township       11       S       Hange       26       E       , NMPM,       C         I. DESIGNATION OF TRANSPORTES OF OIL AND NATURAL GAS         Nome of Authorized Transporter of Oil       or Condensate       Address (Give address to which         Navajo Refining Co.       No. Freeman Ave.         None       None       Address (Give address to which         If well produces of contensate       D       14       11       Si 26E       no         If this production is commingled with their from any other lease or pool, give commingling order number       None       Si 26E       No	From The West
Line of Section 14 Township 11 S Range 26 E , NMPM, C 1. DESIGNATION OF TRANSPORTES OF OIL AND NATURAL GAS None of Authorized Transporter of Oil and or Condensate Address (Give address to which Navajo Refining Co. None of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which None If well produces off or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number	
1. DESIGNATION OF TRANSPORTES OF OIL AND NATURAL GAS         Nome of Authorized Transporter of OIL         Navajo Refining Co.         Nome of Authorized Transporter of OIL         Navajo Refining Co.         Nome of Authorized Transporter of Casinghead Gas         Nome of Authorized Transporter of Casinghead Gas         If well produces off or liquids, give location of tanks.         D         If this production is commingled with that from any other lease or pool, give commingling order number	laves Count,
Nome of Authorized Transporter of Oli x       or Condensate       Address (Give address to which         Na va jo       Refining Co.       No. Freeman Ave.         Nome of Authorized Transporter of Casinghead Gas       or Dry Gas       Address (Give address to which         None       None       Address (Give address to which         If well produces of or liquids, give location of tanks.       Unit       Sec.       Twp.       Fige.       Is gas actually connected?         If this production is commingled with that from any other lease or pool, give commingling order number       In this production is commingled with that from any other lease or pool, give commingling order number	
Navajo       Refining Co.       No. Freeman Ave.         None       None       Address (Give address to which         None       If well produces cil or liquids, give location of tanks.       Unit       Sec.       Twp.       Fige.       Is gas actually connected?         If this production is commingled with their from any other lease or pool, give commingling order number       If this production is commingled with their from any other lease or pool, give commingling order number	approved copy of this form is to be senti-
Nome of Authorizen Transporter of Casinghead Gas       or Dry Gas       Address (Give address to which         None       If well produces off or liquids,       Unit       Sec.       Twp.       Fige.       Is gas actually connected?         If well produces off or liquids,       Unit       Sec.       Twp.       Fige.       Is gas actually connected?         give location of tanks.       D       114       11       St 26E       No         If this production is commingled with that from any other lease or pool, give commingling order number       St 26E       No	Artesia. N_M_88210
If well produces cil or liquids, give location of tanks.       Unit       Sec.       Twp.       Fige.       Is gas actually connected?         If well produces cil or liquids, give location of tanks.       D       -1]4       1]1       Si 26E       NO         If this production is commingled with that from any other lease or pool, give commingling order number	approved copy of this form is to be sent)
If this production is commingled with that from any other lease or pool, give commingling order number	Wher.
	<u></u>
COMPLETION DATA	n. Plug Back Same Resty, Diff. Res
Designate Type of Completion - (X) Date Studged Date Compl. Ready to Prod. Total Depth	1 1 1 F.B.T.D.
Elevations (DF, KKE, RT, GR, etc.) Name of Producing Formation. Top Oil/Gas Pay	Tubing Depth
Perforations	Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE CASING & TUBING SIZE DEPTH SET	SACKS CEMENT
. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of loa able for this depth or be for full 24 hours)	d oil and must be squal to or exceed top alic
Date First New Cil Hun To Tanks Date of Test Producing Method (Flow, pump, )	
Longth of Test Tubing Pressure Cosing Pressure	Choke Size Lly C.p.
Actual Prod. During Test Oil-Bbls. Water-Bbls.	Gae-MCF
GAS WELL	
Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in)	Choke Size
	RVATION COMMISSION
I hereby certify that the rules and regulations of the Oil Conservation APPROVED FEB 1	
Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
TITLE	District II
	in compliance with RULE 1104.
(Signature) well, this form must be acc	allowable for a newly drilled or deepen
<u>Clerk</u> All sections of this for	Superior of a teoletion of the deviation
(Title) able on new and recomplete Lan 1 1984 Fill out only Sections	accordance with RULE 111. m must be filled out completely for allo
	accordance with RULE 111. m must be filled out completely for allo d wells. I. II. III. and VI for changes of owne