NO. OF COPIES RECEIVED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 SANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 Effective 1-1-65 FILE **AND** AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS CEIVED U.S.G.S. LAND OFFICE OIL TRANSPORTER DEC 2 1 1970 OPERATOR O. C. C. PRORATION OFFICE Dalport Oil Corporation 471 Pirat Natl Bank Bldg. Dallas, Texas 75202 Reason(s) for New Well X Change in Transporter of: Recompletion Oil Dry Gas Change in Own If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE ell No. Pool Name, Including Formation Kind of Lease Legse No. State, F Double L Queen B-10417-4 2310 Feet From The South Line and 330 Feet From The 12 15-8 29-E Chaves Range , NMPM, Count III. 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 Oil Artesia, New Mexico Address (Give address to which approved copy of this form is to be sent) Maya to Refining Co. Pipe Line Division one of Authorized Transporter of Casinghead Gas or Dry Gas Unit Sec. Twp. F.ge. Is gas actually connected? When H/I 12 15 29 No If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Plug Back | Same Besty, Diff. Besty. Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. P.B.T.D. Name of Producing Forms 2061 2021 vations (DF, RKB, RT, GR. Top Cil/Gas Pay Tubing Depth 1978 Depth Cast 3895 Gr Queen 1980 .41" holes 2058 1980-84. 1987-91 TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 11" 8 5/8" 175 8X 'C' + 2% CC 336 Circulated 5 1/2 2058 7 7/8 (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) <u>200 ex lite</u> 100 2300 V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Plowing Casing Pressure 12-17-70 12-18-70 Choke Size Length of Test Actual Prod. During Test 90 90 0 **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) OIL CONSERVATION COMMISSION DEC 22 1970 VI. CERTIFICATE OF COMPLIANCE APPROVED 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. 118 1888.5762 DIL AND This form is to be filed in compliance with RULE 1104.

(Signature)

(Date)

President
(Title)
12/18/70

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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

OPERATORDAL CO	il Corporation AD	DRESS 3471 1	st. National	Eank Eldg.
LEASESunset State	WELL N	O.2 FIELD		
LOCATION2310 FSI	& 330' FLL, Sec	tion 12, T-	1561, P-29-	. Chaves County
Depth 336' 827' 1300' 1693' 1975' 2061'	Angle Inclination 'deg 0 1/2 1/2 1-1/2 1-1/2	0. 4. 4. 6. 7.	placement .0000 .2717 .1151 .8775 .3884 .2532	Displacement Accumulated C.0000 4.2717 8.3868 15.2643 22.6527 24.9059
			RE	CEIVED
			D	EC 2 1 1970
			ART	O. C. C. Tesia, office
I hereby certify to the best of my	that the above dy knowledge and b	ata as set elief.	forth is tr	ue and correct
		Ca	ctus Drilli	ng Company
		111	The state of the	meel
		Title:	Clerk	
Affidavit:				
Before me, the unknown to me to be on making deposit behalf of the ope best of his known deviated from the	e the person whos tion, under oath erator of the wel ledge and belief	e name is s states that l identifie such well w	subs c ribed h ; he is acti ed above. an	erebelow, who, ng for and in d that to the
	-	Ston	ffiant's Si	enature)
Sworn and subscr:	ibed to in my pre	sence on th		day of Dec.
	70			
		Notary F of Lea,	ublic in an State of Ne	d for the County w Mexico

Seal