| NO. OF COPIES RECE | 5   |   |   |  |  |
|--------------------|-----|---|---|--|--|
| DISTRIBUTION       |     |   |   |  |  |
| SANTA FE           |     |   |   |  |  |
| FILE               |     | 1 | _ |  |  |
| U.S.G.S.           |     |   |   |  |  |
| LAND OFFICE        |     |   |   |  |  |
| TRANSPORTER        | OIL |   |   |  |  |
| IRANSPORTER        | GAS |   |   |  |  |
| OPERATOR           |     |   |   |  |  |
| PRORATION OFFICE   |     |   |   |  |  |
| Operator           |     |   |   |  |  |
| Read & Stevens,    |     |   |   |  |  |
| Address            |     |   |   |  |  |
| P O Box 2126       |     |   |   |  |  |

| -  | DISTRIBUTION   |   | NSERVATION COMMISSION OR ALLOWABLE   | Form C-104 Supersedes Old C-104 and C-110 |  |  |  |
|--|--|---|--|---|--|--|--|
| -  | FILE J.  |   | AND  | Effective 1-1-85                          |  |  |  |
| -  | LAND OFFICE  | ND OFFICE   |  |   |  |  |  |
| -  | TRANSPORTER GAS  |   | R  | -   |  |  |  |
| ı.   | PRORATION OFFICE   | PRORATION OFFICE  |  |   |  |  |  |
| Read & Stevens, Inc.   |  |   |  | MAY 4 - 10-                               |  |  |  |
|  | P.O. Box 2126, Roswell, New Mexico 88201                                 |   |  |   |  |  |  |
| 1  | Reason(s) for filing (Check proper box) New We!1                         | Change in Transporter of:   | The state of the s |   |  |  |  |
|  | completion OII Dry Gas Ondensate Condensate                              |   |  |   |  |  |  |
|  | f change of ownership give name  |   |  |   |  |  |  |
| II. j  | DESCRIPTION OF WELL AND L  | EASE   Well No.   Pool Name, Including For  | rmation Kind of Lease  | 7,L-0200 %8.                              |  |  |  |
|  | Trobaugh "A" St. Com.  | - 46 2 77 33  | 1  | K-2431                                    |  |  |  |
|  | Unit Letter J; 1650 Feet From The South Line and 1650 Feet From The East |   |  |   |  |  |  |
|  | Line of Section 12 Township 15S Range 27E , NMPM, Chaves County          |   |  |   |  |  |  |
| 11.  | DESIGNATION OF TRANSPORT   | ER OF OIL AND NATURAL GAS   | Address (Give address to which appro-  | ved copy of this form is to be sent)      |  |  |  |
|  | Scurlock Oil Co. Name of Authorized Transporter of Cast                  |   | Houston Club Building, Address (Give address to which appro-   | Houston, Texas                            |  |  |  |
|  | Phillips Petroleum Company Bartlesville, Oklahoma                        |   |  |   |  |  |  |
|  | If well produces oil or liquids, give location of tanks.                 | J 12 15S 27E  | No yes   | 5/15/71 6-28-71                           |  |  |  |
|  | If this production is commingled with COMPLETION DATA                    |   |  | Plug Back   Same Res'v.   Diff. Res'v.    |  |  |  |
|  | Designate Type of Completio  | n - (X) Oll Well Gas Well X   | New Well Workover Deepen   |   |  |  |  |
|  | Date Spudded 12/12/70  | Date Compl. Ready to Prod. $4/7/71$   | Total Depth 87901  | P.B.T.D.<br>8688!                         |  |  |  |
|  | Elevations (DF, RKB, RT, GR, etc.) 3582 RKB                              | Name of Producing Formation Atoka   | Top Oil/Gas Pay /6<br>8512!  | Tubing Depth 8482                         |  |  |  |
|  | Daylocations   | 26-33', 8581-93', 8624-   | -30', 8639-45'   | Depth Casing Shoe<br>87091 RKB            |  |  |  |
|  | TUBING, CASING, AND CEMENTING RECORD                                     |   |  |   |  |  |  |
|  | 17½"   | 12 3/4" csg   | 340  | 200                                       |  |  |  |
|  | 11"  | 8 5/8" csg  | 1720<br>8709   | 200                                       |  |  |  |
|  | 7 7/8"   | 4 1/2" csg<br>2 3/8" tbg  | 8482   | Pkr                                       |  |  |  |
| V.   |  | ATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or he for full 24 hours) |  |   |  |  |  |
| OIL WELL  Date First New Oil Run To Tanks  Date of Test  Producing Method (Flow, p |  |   |  | ift, etc.)                                |  |  |  |
|  | Length of Test   | Tubing Pressure   | Casing Pressure  | Choke Size                                |  |  |  |
|  | Actual Prod. During Test   | Oil-Bble.   | Water - Bble.  | Gas - MCF                                 |  |  |  |
|  | GAS WELL   |   |  |   |  |  |  |
|  | Actual Prod. Toot-MCF/D  | Length of Test 6 hrs  | Bble. Condensate/MMCF  | Gravity of Condensate                     |  |  |  |
|  | Testing Method (pitot, back pr.)   | Tubing Pressure (Shut-in)   | Casing Pressure (Shut-in)  | Choke Size 14/64"                         |  |  |  |
| VI   | Pitot  CERTIFICATE OF COMPLIAN   | 935<br><b>CE</b>  | Pkr OIL CONSERV  | ATION COMMISSION                          |  |  |  |
|  |  |   | APPROVED JUL 7   | 1971                                      |  |  |  |
|  |  |   | 1.1 P Grassott   |   |  |  |  |

## VI

Agent

(Title)

4-30-71

(Date)

This form is to be filed in compliance with RULE 1104.

OIL AND GAS INSPER

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