

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. B. B.		✓
IND. OFFICE		✓
TRANSPORTER	OIL	✓
	GAS	✓
PERATOR		✓
ROTORATION OFFICE		

RECEIVED

Operator

Read & Stevens, Inc. ✓

~~FEB 22 '88~~

dress

P.O. Box 1518, Roswell, NM 88202

Reason(s) for filing (Check proper box)

Other (Please explain)

~~O. G. D.~~
ARTESIA OFFICE

How Well	
Completion	
Change In Ownership	

Change In Transporter Of:	
Oil	<input type="checkbox"/>
Dry Gas	<input type="checkbox"/>
Casinghead Gas	<input checked="" type="checkbox"/>
Condensate	<input checked="" type="checkbox"/>

Effective March 1, 1988

change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Laugh "A" State	Com. 1	Buffalo Valley Penn.	State, Federal , XXX	K-6798
Location				K-2431
Unit Letter	J	1650 Feet From The	South Line and	1650 Feet From The
Line Of Section	12	Township	15S Range	27E, NMPM, Chaves County

DESCRIPTION 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)
Permian Corporation	P.O. Box 1183, Houston, TX 77002
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Co.	4001 Penbrook Odessa, TX 79762

well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
ve location of tanks	J	12	15S	27E	Yes	6-28-71

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
Date Spudded	Date Compl. Ready to Prod		Total Depth			P.B.T.D.		
Measurements (DF, RKB, RT, GR, etc)	Name of Prod. Formation		Top Oil/Gas Pay			Tubing Depth		
Casing Measurements						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			100 / TD-3
			3-26-80
			ENG. W. T. HRC

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load and must be equal to or exceed top allowable for this depth or be for full 24 hours)

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

WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (plot, back pr	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size

CERTIFICATE OF COMPLIANCE

hereby certify that the rules and regulations of the
Conservation Commission have been complied with and
that the information given above is true and complete
to the best of my knowledge and belief.

John Mafey
(Signature)

Engineer

(Title)

2-17-88

(Date)

OIL CONSERVATION COMMISSION

APPROVED FEB 24 1988, 19
BY Original Signed By
TITLE Mike Williams

Oil & Gas Inspector

This form is to be filled in compliance with Rule 1104.

If this is a request for allowable for a newly drilled 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 filled for each pool in multiply.