NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE OIL TRANSPORTER GAS OPER! TOR PROPATION OFFICE Overglor C. H. Juni Address 1500 Douglas, Midland, Texas 79703 Reason(s) for filing (Check proper box) New Well Change in Tra Change in Transporter of: Recompletion Change in Ownership Casinghead Gas If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE State 2 Location В 660 North Feet From The Line of Section Township 158 Range

NEW MEXICO OIL CONSERVATION COMM. .ON REQUEST FOR ALLOWABLE

Form C-104

Supersedes Old C-104 and C-110 Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS RECEIVED AUG 17 1979 D. D. C. TESTA, UF Other (Please explain) Dry Gas Condensate Corinne Grace, P. O. Box 1801, Carlabad, N M 88220 eli No. Pool Name, Including Formation Legae No. Double L Queen associated State, Federal or Fee K-4321 _Line and _ 1650 Bast 29B , NMPM, Chaves County Address (Give address to which approved copy of this form is to be sent) None Name of Authorized Transporter of Casinghead Gas _____ of Dry Gas 🛣 Address (Give address to which approved copy of this form is to be sent) Phillips Petroleum Company 4001 Pembrook, Odessa, Texas 79760 If well produces oil or liquids, give location of tanks. Unit Sec. Twp. P.ge. is gas actually connected? connected 8/17/79 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Workever New Well Deepen Plug Back | Same Res'v. Diff. Res'v Designate Type of Completion - (X) X Date Compl. Ready to Prod. Total Depth 12/8/71 8/17/78 1956 1933 Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top O!l/Gas Pay Tubing Depth 3862 DF Queen 1926 None Pe:forations Depth Casing Shoe 1926 - 28 1956 TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12 1/2 8 5/8 292 250 7 7/8 5 1/2 1956 250 V. TEST DATA 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 be for full 24 hours) OIL WELL Data First New Cil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Tent Tubing Pressure Casing Pressure Choke Size 4 Actual Pred. During Test Cil - Bbls. Water - Bbls. Gas - MCF GAS WELL Actual Pred. Tool-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Tealing Method (pitot, back pr.) 2 hrs None Tubing Freesure (Shut-in) Casing Pressure (Shut-in) Choke Size Orifice Well Tester None 46# 24/64 Frakming USP approval VI. CLETTICICATE OF COMPLIANCE 60 Lays AUG 2 0 1979 I horeby critify 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. SUPERVISOR, DISTRICT, II TITLE Canu Holles This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despendi well, this form must be accompanied by a tabulation of the deviction tasts taken on the well in accordance with multiplet. Agent All sections of this form most be filled out completely for allowable on new and recompleted wells. 8/16/79

Fill out only Sections I. H. III, and VI for changes of concer-well name or number, or transportes or other such change of condition,

Separate Forms C-104 must be filed for each pool in multiply completed wells.