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LAND OFFICE		
TRANSPORTER	OIL / GAS /	
OPERATOR	/	
PRODUCTION OFFICE	/	

NEW MEXICO OIL CONSERVATION COMM. ON
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-101 and C-11
Effective 1-1-65

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MAY 9 1977

Operator Burk Royalty Co. ✓		O. C. C. ARTESIA, OFFICE	
Address 800 Oil & Gas Bldg., Wichita Falls, Texas 76301			
Reason(s) for filing (Check proper box)		Other (Please explain)	
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐	J. Salazar H. Federal Effective 4/1/77	
Recompletion ☐	Casinghead Gas ☐ Condensate ☐		
Change in Ownership ☒			

If change of ownership give name and address of previous owner Amoco Production Co., Box 68, Hobbs, New Mexico 88240

DESCRIPTION OF WELL AND LEASE			
Lease Name: Double L Queen	Well No.: 1	Pool Name, including Formation: Double L Queen Associated	Kind of Lease: State, <u>Federal</u> or Fee
Unit - Tract 12			Lease No.: NM-0493690
Location			
Unit Letter: P	990	Feet From The: S	Line and: 330
		Feet From The: FEL	
Line of Section: 23	Township: 14-S	Range: 29-E	NMFM, Chaves County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil ☒ or Condensate ☐			Address (Give address to which approved copy of this form is to be sent)		
The Permian Corp.			Midland, Texas		
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐			Address (Give address to which approved copy of this form is to be sent)		
Phillips Petroleum Corp.			Bartlesville, Oklahoma		
If well produces oil or liquids, give location of tanks.	Unit: P	Sec.: 23	Twp.: 14-S	Rge.: 29-E	Is gas actually connected? Yes
					When: 2-28-71

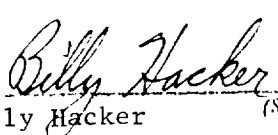
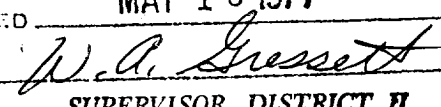
If this production is commingled with that from any other lease or pool, give commingling order number: _____

COMPLETION DATA									
Designate Type of Completion - (X)									
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
Elevations (DF, RKB, 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 OIL WELL (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)			
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL			
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE	OIL CONSERVATION COMMISSION
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.	APPROVED MAY 18 1977
 Billy Hacker Agent	BY  SUPERVISOR, DISTRICT II
5/6/77	TITLE _____
	This form is to be filed in compliance with RULE 1104.
	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 logs taken on the well in accordance with RULE 111.
	All portions of this form must be filled out completely for allowable on new and re-completed wells.
	Fill out only Sections I, II, III, and VI for changes of owner, or if new owner, or transporter or other such change of conditions.