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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

AND

Form C-104 Supersedes Old C-104 and C-110 RECETTUED

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS JUN 9 1969 O. C. C. ARTESIA, OFFICE ANADARKO PRODUCTION COMPANY Address P. O. Box 9317, FORT WORTH, TEXAS 76107 Other (Please explain) Reason(s) for filing (Check proper box) Change in Transporter of: New Well Dry Gas Recompletion Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation Kind of Lease Lease No. b68064 XXXe, FederalXXXX 13 SQUARE LAKE GRAYBURG S.A. GRIER Location 1980 Feet From The SOUTH Line and 1980 EAST Unit Letter EDDY 3IE NMPM. Range 20 Township Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Oil K | or Condensate | Address (Give address to which approved copy of this form is to be sent) P. O. Box 67, ARTESIA, NEW MEXICO 88210
Address (Give address to which approved copy of this form is to be sent) NAVAJO REFINING COMPANY Name of Authorized Transporter of Casinghead Gds P. O. Box 6666, Odessa, Texas 79760 PHILLIPS PETROLEUM COMPANY Is gas actually connected? Bge. Twp. Unit Sec. If well produces oil or liquids, give location of tanks. 31 165 : 31E YES If this production is commingled with that from any other lease or pool, give commingling order number: . COMPLETION DATA Plug Back | Same Restv. Diff. Restv. Workover Deepen Gas Well Oil Well Designate Type of Completion - (X) P.B.T.D. Date Compl. Ready to Prod. Total Depth Date Spudded Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bbls. Oil-Bbls. Actual Prod. During Test **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE 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. OIL AND GAS INSPECTOR

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J. N. V	MAFF	, , ,	ignature /
PRODUC	TION F	RECORDS	Supervisor
			450.1.1

JUNE 6, 1969

(Date)

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.

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

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 completed wells.