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| FILE | | 1. | | |
| U.S.G.S. | | | | |
| LAND OFFICE | | | | |
| TRANSPORTER | OIL | | | |
| | GAS | | | |
| OPERATOR | | | | |
| PRORATION OFFICE | | | | |

NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

| ļ | LAND OFFICE | REC | EIVED | NATURAL C | <i>3</i> A3 | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--|------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | OPERATOR 3 SEP 27 1971 | | | | | | | | |
| I. | Operator REMUDA OIL & GAS (| PEMIDA OTT 2 CAR COMPANY / D C > | | | | | | | |
| | Address OFFICE | | | | | | | | |
| | | 150 Mid-America Bldg., Midland, Texas 79701 | | | | | | | |
| | leason(s) for filing (Check proper box) Change in Transporter of: | | | | | | | | |
| | Recompletion | Oil Dry Gas | | | | | | | |
| | Change in Ownership X | Casinghecd Gas Conden | sate | | | | | | |
| | If change of ownership give name and address of previous owner | Robert A. Dean - 823 | Midland Tower | - Midla | and, Texas 797 | '01 | | | |
| II. | DESCRIPTION OF WELL AND I | EASE | | Kind of Leas | | Lease No. | | | |
| | Pan American 13 St | Well No. Pool Name, Including Fo | ormation | State, Federa | | 139941 | | | |
| | Location A 660 | Feet From The East Line | e and 660 | Feet From | The North | | | | |
| | Unit Letter; | | B1 E , NMPM | | Eddy | County | | | |
| | Line of Section 10% | | | 4 | Ludy | | | | |
| III. | DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil | SIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS me of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) | | | | | | | |
| | _ | me of Authorized Transporter of Casinghead Gas or Dry Gas X | | | Address (Give address to which approved copy of this form is to be sent) | | | | |
| | Phillips Petroleum If well produces oil or liquids, | Unit Sec. Twp. Rge. | Bartlesville, Oklaho Is gas actually connected? Who | | | | | | |
| | give location of tanks. | | Yes | | 1-17-66 | | | | |
| | If this production is commingled wit COMPLETION DATA | h that from any other lease or pool, | New Well Workover | Deepen | Plug Back Same Re | s'v. Diff. Res'v. | | | |
| | Designate Type of Completio | | New Mell Molechel | Deepen | i i | | | | |
| | Date Spudded | Date Compl. Feady to Prod. | Total Depth | | P.B.T.D. | | | | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | <u></u> | Tubing Depth | | | | |
| | Perforations | | | | Depth Casing Shoe | | | | |
| | TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | SACKS CEMENT | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 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 Date First New Oil Run To Tanks | Date of Test | Producing Method (Flo | | ift, 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 (pitot, back pr.) | Tubing Press re (Shut-in) | Casing Pressure (Shut-in) | | Choke Size | | | | |
| | resting memor (prost each proy | | | | | | | | |
| VI. | CERTIFICATE OF COMPLIAN | CE | OIL | | ATION COMMISSIO | | | | |
| | I hereby certify that the rules and | regulations of the Oil Conservation | SEP 2 7 1971 , 19 | | | | | | |
| Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | | TITLE OR BAR GAR MOPS CTUR | | | | | | |
| | | | | | | | | (1) Chamba | 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 |
| | (Sign | | | | | | | | |
| | Agent | Agent | | | well, this form must be 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. | | | | |
| | 9-22-71 | 0_22_71 | | | | | | | |
| | | ate) | well name or numb | er, or transpo | rter, or other such cha | nge of condition. | | | |

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

(Date)