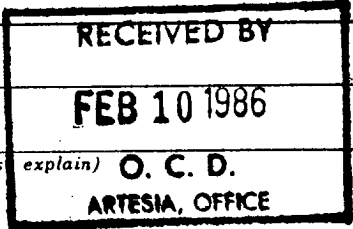


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| TRANSPORTER | OIL | ✓ |
| | GAS | ✓ |
| OPERATOR | | ✓ |
| PRORATION OFFICE | | |

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



| | |
|---|---|
| Operator Spectrum 7 Exploration Company ✓ | |
| Address 1610 North J, Midland, Texas 79701 | |
| Reason(s) for filing (Check proper box) | Other (Please explain) |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of ownership give name and address of previous owner _____

| | | | | | |
|---|--|---------------|---|--|-----------|
| Lease Name State 16 | | Well No. 1 | Pool Name, Including Formation <i>W. Homalau Dranburg</i> Undesignated Premier | Kind of Lease State, Federal or Fee State | Lease No. |
| Location Unit Letter <u>J</u> ; <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>16</u> Township <u>16S</u> Range <u>30E</u> , NMPM, <u>Eddy</u> County | | | | | |

| | | | | | |
|--|-----------|--|-------------|-------------|---|
| 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) | | | |
| Western Oil Transportation Co., Inc. | | P.O. Box 1183, Houston, Texas 77251-1183 | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | | Address (Give address to which approved copy of this form is to be sent) | | | |
| Phillips Petroleum Company | | 410 HS & L Bldg., Bartlesville, Okla 74004 | | | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 16 | Twp. 16S | Rge. 30E | Is gas actually connected? When <i>Yes</i> <u>4-12-86</u> No <u>On completion of negotiation</u> |

If this production is commingled with that from any other lease or pool, give commingling order number: No.

| | | | | | | | | | |
|--|--|-------------------------------|----------|---------------------------|----------|-------------------------|-----------|--------------|---------------|
| Designate Type of Completion - (X) | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Rest'v. | Diff. Rest'v. |
| | | | X | X | | | | | |
| Date Spudded 12/04/85 | Date Compl. Ready to Prod. 12/23/85 | Total Depth 3000' | | P.B.T.D. 2938' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3807.3' GR | Name of Producing Formation Premier | Top Oil/Gas Pay 2838' 2861 | | Tubing Depth 2810' | | | | | |
| Perforations 2861 to 2876 | | | | Depth Casing Shoe 2990 | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12 1/4 | | 8 5/8 | | 394 | | 200 sx Class C | | | |
| 7 7/8 | | 4 1/2 | | 2990 | | 450 sx 50/50 Poz & C.C. | | | |
| | | 2 3/8 | | 2810 | | | | | |

| | | | | |
|---------------------------------|--|-----------------|---|------------|
| 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 |

| | | | |
|--|----------------------------------|--------------------------------|-----------------------|
| Actual Prod. Test-MCF/D 314.6 | Length of Test 4 hrs. | Bbls. Condensate/MMCF 0 | Gravity of Condensate |
| Testing Method (pitot, back pr.) Back Pr. | Tubing Pressure (shut-in) 690 | Casing Pressure (shut-in) - | Choke Size 16/64" |

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.

Neal A Taylor
(Signature)
Agent
(Title)
February 4, 1986
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 14 1986, 19____

BY Original Signed By
Les A. Clements
TITLE Supervisor District II

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 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 filed for each pool in multiply completed wells.