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|                        | GAS 2 |
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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

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DEC 27 1976

I. Operator HOLLY ENERGY, INC.  
 Address 2001 BRYAN TOWER, SUITE 2680, DALLAS, TEXAS 75201  
 Reason(s) for filing (Check proper box)  
 New Well  Change In Transporter of:  
 Recompletion  Oil  Dry Gas   
 Change In Ownership  Eff. Casinghead Gas  Condensate   
12-15-76

If change of ownership give name and address of previous owner Franklin, Aston & Fair, Ltd., P.O. Box 1090, Roswell, N. M. 88201

II. DESCRIPTION OF WELL AND LEASE

|   |          |                                    |                                      |                  |
|---|----------|------------------------------------|--------------------------------------|------------------|
| Lease Name  | Well No. | Pool Name, including Formation     | Kind of Lease                        | Lease No.        |
| <u>McIntyre A</u>   | <u>6</u> | <u>South Loco Hills Morrow Gas</u> | <u>State, Federal or Fee Federal</u> | <u>LC 057634</u> |
| Location  |          |                                    |                                      |                  |
| Unit Letter <u>0</u> ; <u>990</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>East</u> |          |                                    |                                      |                  |
| Line of Section <u>20</u> Township <u>17S</u> Range <u>30E</u> , NMPM, <u>Eddy</u> County                   |          |                                    |                                      |                  |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |
|--|--|
| 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)   |
| <u>Navajo Crude Oil Purchasing Co.</u>   | <u>P. O. Box 175, Artesia, N. M. 88210</u>   |
| 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)   |
| <u>Gas Co. of New Mexico (Dry Gas)</u><br><u>Continental Oil Co. (Low Pressure Gas)</u>                                  | <u>First International Bldg, Dallas, Tx. 75270</u><br><u>Box 2197, Houston, Texas 77001</u>  |
| If well produces oil or liquids, give location of tanks.   | Is gas actually connected? <input checked="" type="checkbox"/> <u>When</u> <u>Gas Co. of N.M. 5-7-75</u><br><u>Continental 5-29-75</u> |

If this production is commingled with that from any other lease or pool, give commingling order number: SW886

IV. COMPLETION DATA

|                                      |                             |                 |              |          |        |           |             |              |
|--------------------------------------|-----------------------------|-----------------|--------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X)   | Oil Well                    | Gas Well        | New Well     | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| <input checked="" type="checkbox"/>  |                             |                 |              |          |        |           |             |              |
| 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 |          |        |           |             |              |
|                                      |                             |                 |              |          |        |           |             |              |
|                                      |                             |                 |              |          |        |           |             |              |

V. 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 (pitot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size            |

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.

J. H. Lyon  
 Operations Mgr. (Title)  
12-15-76  
 (Date)

OIL CONSERVATION COMMISSION  
 APPROVED DEC 29 1976, 19\_\_\_\_  
 BY W. A. Leasett  
 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.