Litective 1-1-65 AND U.S.G.S. HORIZATION TO TRANSPORT OIL AND .TURAL GAS LAND OFFICE OIL RECEIVED TRANSPORTER GAS OPERATOR MAY 1 8 1976 PRORATION OFFICE Operator General Operating Company O. C. C. ARTESIA, OFFICE 711 Commerce Building, Fort Worth, Texas 76102 Reason(s) for Isling (Check proper box) Other (Please explain) X New Well Dry Gas Recompletion Casinghead Gas Condensate 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 Lease Name Grayburg Jackson State, Federal or Fee Federal LC+028992(j 2 Grayburg Jackson Q-G-SA Unit Tract Location 6601 Feet From The South Line and 330 Feet From The 30E Eddy , NMPM, County Township 17S Range Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil P. O. Box 1510, Midland, Texas 79701

Address (Give address to which approved copy of this form is to be sent) Texas-New Mexico Pipe Line Company Name of Authorized Transporter of Casinghead Gas or Dry Gas Is gas actually connected? Sec. Twp. Pae. Unit If well produces oil or liquids, 22 17S 30E No P If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Same Resty. Diff. Resty. Plug Back New Well Workover OII Well Designate Type of Completion = (X) X X P.B.T.D. Date Compl. Ready to Prod. Total Depth Date Spudded 3-9-76 2-19-76 32001 <u> 3177'</u> Tubing Depth Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation 30521 Grayburg 3081 1 3632' GR, 3642' RKB Depth Casing Shoe 3099-3102 3081-85 Perforations 3081-3/02 ownell 3094-96 3200 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 8-5/8" OD 5-1/2" OD 4951 100 11" 32001 400 2-3/8" OD 30521 On Packer 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) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test 3-9-76 3-22-76 Flow Choke Size Casing Pressure Tubing Pressure Length of Test 20 Psi None 24 hours None Water - Bble. Oil - Bbla. Actual Prod. During Test 40 (Est.) 81 82 BF 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 MAY 1 8 1976 APPROVED 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. SUPERVISOR, DISTRICT IL

TITLE .

C.w. Sumboff C. W. Stumhoffefienature) Par tner (Title) May 17, 1976

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 moleted wells ...