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| LAND OFFICE            |     |
| TRANSPORTER            | OIL |
|                        | GAS |
| OPERATOR               | 1   |
| PRODUCTION 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-105  
Effective 10-1-79

SEP 18 1981

O. C. O.  
ARTESIA OFFICE

Estate of T. B. Knox /

Address

601 Mercantile Dallas Bldg., Dallas, Texas 75201

Reason(s) for filing (Check proper box)

New Well ☐  
Recompletion ☐  
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐  
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

Change of lease name.

If change of ownership give name  
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

|                            |          |                                                             |                                |           |
|----------------------------|----------|-------------------------------------------------------------|--------------------------------|-----------|
| Lease Name                 | Well No. | Pool Name, including Formation                              | Kind of Lease                  | Lease No. |
| Lucia Brooks <i>Stry 2</i> | 2        | Leo Queen Grayberg                                          | State, Federal or Free Federal | LC 06066  |
| Location                   |          |                                                             |                                |           |
| Unit Letter                | K        | 1980' Feet From The South Line and 1980' Feet From The West |                                |           |
| Line of Section            | 14       | Township 18 South Range 30 East, NMPM,                      | Eddy                           | County    |

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                  |                                                                          |                            |       |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------|-------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |                            |       |
| Navajo Crude Oil Purchasing                                                                                      | Artesia, New Mexico 88210                                                |                            |       |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>    | Address (Give address to which approved copy of this form is to be sent) |                            |       |
|                                                                                                                  |                                                                          |                            |       |
| If well produces oil or liquids, give location of tanks.                                                         | Unit Sec. Twp. Rge.                                                      | Is gas actually connected? | When  |
|                                                                                                                  | K 14 18 S 30 E                                                           | No                         | ----- |

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

III. COMPLETION DATA

|                                                                  |                                                                                                                                                                                                                                                                                             |                 |                      |
|------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------|
| Designate Type of Completion - (X)                               | Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Some Res'n. <input type="checkbox"/> Full P. <input type="checkbox"/> |                 |                      |
| Date Spudded                                                     | Date Compl. Ready to Prod.                                                                                                                                                                                                                                                                  | Total Depth     | P.B.T.D.             |
| 3-31-79                                                          | 5-15-79                                                                                                                                                                                                                                                                                     | 3900'           | 3853'                |
| Elevations (DE, RKB, RT, GR, etc.)                               | Name of Producing Formation                                                                                                                                                                                                                                                                 | Top Oil/Gas Pay | Testing Depth        |
| 3510.2 GR                                                        | Loco Hills Zone                                                                                                                                                                                                                                                                             | 3536 - 3566     | 3494'                |
| Perforations                                                     |                                                                                                                                                                                                                                                                                             |                 | Depth Casing Shoe    |
| 3536' - 3542', 1 1/2" Perf./Ft.; 3559' - 3566', 1 1/2" Perf./Ft. |                                                                                                                                                                                                                                                                                             |                 | 3853'                |
| TUBING, CASING, AND CEMENTING RECORD                             |                                                                                                                                                                                                                                                                                             |                 |                      |
| HOLE SIZE                                                        | CASING & TUBING SIZE                                                                                                                                                                                                                                                                        | DEPTH SET       | SACKS CEMENT         |
| 12 1/4"                                                          | 8 5/8", 20#                                                                                                                                                                                                                                                                                 | 539'            | 350 sx, circulated.  |
| 7 7/8"                                                           | 5 1/2", 15.5#                                                                                                                                                                                                                                                                               | 3853'           | 1 st stage, 575 sx.  |
|                                                                  |                                                                                                                                                                                                                                                                                             |                 | 2nd stage, 950 sacks |
| STAGE COLLAR AT 1664'                                            |                                                                                                                                                                                                                                                                                             |                 |                      |

IV. 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 oil well 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.) |            |
| 5-1-79                          | 5-15-79          | PUMP                                          |            |
| Length of Test                  | Testing Pressure | Casing Pressure                               | Choke Size |
| 24 hours                        | 20#              | -0-                                           | OPEN       |
| Actual Prod. During Test        | Oil - bbls.      | Water - bbls.                                 | Gas - MCF  |
| 103 bbls.                       | 19               | 84                                            | TSTM.      |

Posted ID-3  
Call Stry 2  
to James name  
10-2-81

GAS WELL

|                                  |                            |                           |                       |
|----------------------------------|----------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D        | Length of Test             | Bbls. Condensate/MMCF     | Gravity of Condensate |
|                                  |                            |                           |                       |
| Testing Method (pilot, back pr.) | Testing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |
|                                  |                            |                           |                       |

V. 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.

Jack D. Knox  
(Signature)  
Agent

September 11, 1981

OIL CONSERVATION COMMISSION

APPROVED SEP 29 1981

BY W. A. Gressett  
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 calculation of the oil well tests taken on the well in accordance with RULE 111.  
All portions of this form must be filled out completely for all the oil and gas produced and sold.  
Fill out only Sections I, II, III, and VI for change of owner. VII must be filled out for transporter, or only a change of conditions.