| STATE OF NEW MEXICO   | RECEIVE  |  |  | •   |  |  |
|---|--|--|--|---|--|--|
| ENERGY AND MINERALS DEPARTMENT  | • •  |  |  |   | Form C-104   |  |
|   | O. C.  |  |  |   | Revised 10-0<br>Format 06-01   |  |
|   | UNSERVA  | TIGN DI  | ISION  | l   | Page 1   |  |
| SANTA FE  | P. O. BO)  | K 2088   |  |   |  |  |
| VILE SAN'   | TA FE, NEW   | MEXICO 8   | 7501   |   |  |  |
| LAND OFFICE   |  |  | •  |   |  |  |
| TRANSPORTER OIL V   | REQUEST FOR  | ALLOWABLE  |  |   |  |  |
| OPENATOR  | AN   |  |  |   |  |  |
|   | ON TO TRANSP   | ORT OIL AND  | NATURA   | AL GAS  |  |  |
| Operator<br>Steel Oil and Gas Company   |  |  | <u> </u>   |   |  |  |
| Address   |  |  |  |   |  | <u> </u>   |
| P. O. Box 1610 Midland, Texas   | s 79702  | LOIL   | (Planes  |   |  | _ <u></u>  |
| Reason(s) for filing (Check proper box)   | names of   | Uihei  | (Please e  | zylain)   |  |  |
| X New Well Change in Trans;   |  | Gas  |  |   |  |  |
|   |  | ndensate   | · •  |   |  |  |
| Change in Ownership Casinghead  |  |  |  |   |  |  |
| If change of ownership give name  |  |  |  |   |  |  |
| and address of previous owner   |  |  |  |   |  |  |
| II. DESCRIPTION OF WELL AND LEASE   |  |  |  |   |  | Lease No   |
| Lease Name Well No. Pool N  | Name, Including Fo   |  | 1  | (ind of Lease<br>State, Federal or Fe   | e Federal  | LC-02938   |
| Wilmar Federal 2   Tama   | ano (Bone S  | pringsi ·  |  |   | · rouciai  |  |
| Location Unit Letter K : 1980Feet From The  |  | and 198(   | )  | Feet From The   |  |  |
| Location Unit Letter K 1980Feet From The Line of Section 4 Township 18S III. DESIGNATION OF TRANSPORTER OF OIL A  | Range 3  | and <u>1980</u>  | )<br>, NM <b>PM</b> ,  | _ Feet From The<br>Ea   | West<br>ddy  | Count  |
| Location Unit Letter K : 1980 Feet From The   | Range 3  | and 1980<br>1E<br>   | )<br>, NMPM,<br>address to   | _Feet From The<br>Ea<br>which approved co   | West<br>ddy<br>py of this form is  | Count  |
| Location Unit Letter K 1980 Feet From The Line of Section 4 Township 18S III. DESIGNATION OF TRANSPORTER OF OIL AI Name of Authorized Transporter of Ott X or Condense Nava io Crude Oil Purchasing   | Range 3  | and 1980<br>1E<br>   | )<br>, NMPM,<br>address to<br>Artesi   | Feet From The<br>Ed<br>which approved co<br>a, NM 8821  | West<br>ddy<br>py of this form is<br>0   | Count<br>to be sent)   |
| Location Unit Letter K 1980Feet From The Line of Section 4 Township 18S III. DESIGNATION OF TRANSPORTER OF OIL AI Name of Authorized Transporter of Oli T or Condense Nava jo Crude Oil Purchasing Name of Authorized Transporter of Casinghead Gas (X) or  | Range 3  | and 1980<br>1E<br>   | )<br>, NMPM,<br>address to<br>Artesi<br>address to   | _Feet From The<br>Ea<br>which approved co   | West<br>ddy<br>py of this form is<br>0   | Count<br>to be sent)   |
| Location Unit Letter K 1980 Feet From The Line of Section 4 Township 18S III. DESIGNATION OF TRANSPORTER OF OIL A) Name of Authorized Transporter of Oil (X) or Condense Nava jo Crude Oil Purchasing Name of Authorized Transporter of Casinghead Gas (X) of CANDCO FNC.   | Range 3  | and 198(<br><u>1E</u><br><u>GAS</u><br><u>Address (Give</u><br><u>Box 159</u> ,<br><u>Address (Give</u><br><u>Boy 19</u>   | )<br>, NMPM,<br>address to<br>Artesi<br>address to<br>59   | Feet From The<br>Ed<br>which approved co<br>a, NM 8821<br>which approved co<br>Mich approved co   | West<br>ddy<br>py of this form is<br>0   | Count<br>to be sent)   |
| Location<br>Unit Letter <u>K</u> <u>1980</u> Feet From The<br>Line of Section <u>4</u> Township <u>18S</u><br>III. DESIGNATION OF TRANSPORTER OF OIL AI<br>Name of Authorized Transporter of Otil <u>M</u> or Condense<br>Nave of Authorized Transporter of Casinghead Gas <u>O</u> or<br><u>CONDCO</u> <u>FNC</u> ,<br>If well produces oil or liquids, Unit Sec.  | Range 3<br>ND NATURAL<br>ate ::<br>Dry Gas ::<br>Twp. Rge.   | and <u>1980</u><br><u>1E</u><br><u>GAS</u><br><u>Address (Give</u><br><u>Box 159</u> ,<br><u>Address (Give</u><br><u>Boy 19</u><br><u>Is gas actually</u>  | , NMPM,<br>address to<br>Artesi<br>address to<br>59<br>( connected   | Feet From The<br>Ed<br>which approved co<br>a, NM 8821<br>which approved co<br>Mich approved co   | West<br>ddy<br>py of this form is<br>0   | Count<br>to be sent)   |
| Location         Unit Letter       K       1980 Feet From The_         Line of Section       4       Township       18S         III. DESIGNATION OF TRANSPORTER OF OIL AI         Name of Authorized Transporter of Otil X       or Condense         Name of Authorized Transporter of Otil X       or Condense         Name of Authorized Transporter of Casinghead Gas X       or         Name of Authorized Transporter of Casinghead Gas X       or         Name of Authorized Transporter of Casinghead Gas X       or         If well produces oil or liquids, give location of tanks.       K       4  | Range 3<br>ND NATURAL<br>ate<br>Dry Gas<br>Twp. Rge.<br>18S 31E  | and 1980<br>1E<br>GAS<br>Address (Give<br>Box 159,<br>Address (Give<br>Boy 19<br>Is gas actually<br>Vill   | , NMPM,<br>address to<br>Artesi<br>address to<br>59<br>(connected<br>NO-   | Feel From The<br>which approved co<br>a, NM 8821<br>which approved co<br>Mich approved co<br>Mich approved co<br>Mich approved co   | West<br>ddy<br>py of this form is<br>0   | Count<br>to be sent)   |
| Location         Unit Letter       K       1980 Feet From The_         Line of Section       4       Township       185         III. DESIGNATION OF TRANSPORTER OF OIL AI         Name of Authorized Transporter of Oil       Township       185         Name of Authorized Transporter of Oil       Township       185         Name of Authorized Transporter of Oil       Township       Or Condense         Name of Authorized Transporter of Casinghead Gas (2)       or         Ocnoco       INC.       If well produces oil or liquids, the sec.       If this production is commingled with that from any othe   | Range     3       ND NATURAL       sate       ate       ate       Dry Gas       Twp.       Rge.       18S       31E       er lease or pool,  | and 1980<br>1E<br>GAS<br>Address (Give<br>Box 159,<br>Address (Give<br>Boy 19<br>Is gas actually<br>Vill   | , NMPM,<br>address to<br>Artesi<br>address to<br>59<br>(connected<br>NO-   | Feel From The<br>which approved co<br>a, NM 8821<br>which approved co<br>Mich approved co<br>Mich approved co<br>Mich approved co   | West<br>ddy<br>py of this form is<br>0   | Count<br>to be sent)   |
| Location         Unit Letter       K       1980 Feet From The_         Line of Section       4       Township       18S         III. DESIGNATION OF TRANSPORTER OF OIL AI         Name of Authorized Transporter of Otil X       or Condense         Name of Authorized Transporter of Otil X       or Condense         Name of Authorized Transporter of Casinghead Gas X       or         Name of Authorized Transporter of Casinghead Gas X       or         Name of Authorized Transporter of Casinghead Gas X       or         If well produces oil or liquids, give location of tanks.       K       4  | Range     3       ND NATURAL       sate       ate       ate       Dry Gas       Twp.       Rge.       18S       31E       er lease or pool,  | and 1980<br>1E<br>GAS<br>Address (Give<br>Box 159,<br>Address (Give<br>Boy 19<br>Is gas actually<br>Vill   | , NMPM,<br>address to<br>Artesi<br>address to<br>59<br>(connected<br>NO-   | Feel From The<br>which approved co<br>a, NM 8821<br>which approved co<br>Mich approved co<br>Mich approved co<br>Mich approved co   | West<br>ddy<br>py of this form is<br>0   | Count<br>to be sent)   |
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| Location<br>Unit Letter <u>K</u> <u>1980</u> Feet From The<br>Line of Section <u>4</u> Township <u>18S</u><br>III. DESIGNATION OF TRANSPORTER OF OIL AN<br>Name of Authorized Transporter of Oil <u>C</u> or Condense<br>Name of Authorized Transporter of Oil <u>C</u> or Condense<br>Name of Authorized Transporter of Casinghead Gas <u>C</u> of<br><u>CONDCO</u> <u>FNC</u> .<br>If well produces oil or liquids, <u>Unit</u> Sec.<br>If well produces oil or liquids, <u>K</u> <u>4</u><br>If this production is commingled with that from any othe<br>NOTE: Complete Parts IV and V on reverse side if<br>VI. CERTIFICATE OF COMPLIANCE   | Range     3       ND NATURAL       sate       ate       ate       Twp.       Rge.       18S       31E       er lease or pool, <i>fnecessary</i> .                                      | and 1980<br>1E<br>GAS<br>Address (Give<br>Box 159,<br>Address (Give<br>Boy 19<br>Is gas actually<br>y.g.<br>give commingl  | , NMPM,<br>address to<br>Artesi<br>address to<br>59<br>(connected<br>NO-<br>ing order  | Feet From The<br>Ed<br>which approved co<br>a, NM 8821<br>which approved co<br>M. J. aud<br>When<br>-ASAP<br>number:  | West<br>ddy<br>py of this form is<br>0<br>py of this form is<br>7-24-5<br>1 DIVISION   | Count<br>to be sent)<br>to be sent)<br>79715<br>79715<br>79715<br>79715<br>79715<br>79715<br>79715   |
| Location<br>Unit Letter <u>K</u> <u>1980</u> Feet From The_<br>Line of Section <u>4</u> Township <u>18S</u><br>III. DESIGNATION OF TRANSPORTER OF OIL AN<br>Name of Authorized Transporter of Oil <u>X</u> or Condense<br>Name of Authorized Transporter of Oil <u>X</u> or Condense<br>Name of Authorized Transporter of Casinghead Gas <u>X</u> or<br><u>CONDCO</u> <u>FNC</u> ,<br>If well produces oil or liquids, <u>K</u> <u>4</u><br>If this production is commingled with thet from any othe<br>NOTE: Complete Parts IV and V on reverse side if<br>VI. CERTIFICATE OF COMPLIANCE   | Range       3         ND NATURAL         aate         Dry Gas         Twp.       Rge.         18S       31E         er lease or pool. <i>f necessary</i> .         ation Division have | and 1980<br>1E<br>GAS<br>Address (Give<br>Box 159,<br>Address (Give<br>Boy 19<br>Is gas actually<br>Vill   | , NMPM,<br>address to<br>Artesi<br>address to<br>59<br>(connected<br>NO-<br>ing order  | Feet From The<br>Ed<br>which approved co<br>a, NM 8821<br>which approved co<br><i>M</i> .(] aud<br>to<br>When<br>ASAP<br>number:  | West<br>ddy<br>py of this form is<br>0<br>py of this form is<br>7-24-5<br>1 DIVISION   | Count<br>to be sent)<br>to be sent)<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>797785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>79785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>70785<br>707775<br>707777<br>707777777<br>707777777777                                       |
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## IV. COMPLETION DATA

|   | ( <b>V</b> )                                | Oil Well      | Gas Well   | New Well                | Workover   | Deepen | Plug Back            | Same Res'v.    | Diff. Res'v |
|---|---|---------------|------------|-------------------------|------------|--------|----------------------|----------------|-------------|
| Designate Type of Completion - (X)              |   | ¦ X           | 1          | X                       | 1          | 1      | 1                    | •              | 1           |
| Date Spudded                                    | Date Comp                                   | l. Ready to I | Prod.      | Total Dept              | h          | - 4    | P.B.T.D.             | _ <b>t</b>     | 1           |
| 5-25-86   | 7-7-86                                      |               | 8540       |                         |            | 8480   |                      |                |             |
| Elevations (DF, RKB, RT, GR, etc.)<br>3721.7 GR | Name of Producing Formation<br>Bone Springs |               |            | Top Oil/Gas Pay<br>8130 |            |        | Tasing Septi<br>8430 |                |             |
| Perforations<br>8138 - 84                       | 30  |               |            |                         | - <u>-</u> |        | Depth Casi<br>8      | ng Shoe<br>540 |             |
|   |   | TUBING,       | CASING, AN | D CEMENTI               | NG RECOR   | >      |                      |                |             |
| HOLESIZE  | CASI  | NG & TUBI     | ING SIZE   |                         | DEPTH SE   | Т      | SACKS CEMENT         |                | чт          |
| 17-1/2  | 13-   | 3/8           |            |                         | 688        |        | 750 toc surface      |                | e           |
| 11  | 8-  | 5/8           |            |                         | 2180       |        | 850 toc surface      |                | e           |
| 7-7/8   |   | 1/2           |            |                         | 8540       |        | 1500 t               | oc 1219 7      | ſS          |
| 2-7/8   | 2-  | 7/8           |            | 1                       | 8430       |        |                      |                |             |

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 allou-OIL WELL able for this depth or be for full 24 houre)

| Date First New Oil Run To Tanks | Date of Test    | Producing Method (Flow, pum | Producing Method (Flow, pump, gas lift, etc.)<br>Pump |  |  |  |  |
|---------------------------------|-----------------|-----------------------------|---|--|--|--|--|
| 7-7-86                          | 7-14-86         | Pump                        |   |  |  |  |  |
| Length of Test                  | Tubing Pressure | Casing Pressure             | Choke Size  |  |  |  |  |
| 24 hrs                          | 65              | 65                          | NA  |  |  |  |  |
| Actual Prod. During Test        | Oil-Bbis.       | Water-Bbis.                 | Gas - MCF   |  |  |  |  |
|                                 | 160             | 25                          | 130   |  |  |  |  |

## GAS WELL

| Actual Prod. Test-MCF/D          | Length of Test              | Bbls. Condensate/MMCF     | Gravity of Condensate |
|----------------------------------|-----------------------------|---------------------------|-----------------------|
| Testing Method (pitot, back pr.) | Tubing Pressure ( Shut-is ) | Casing Pressure (Shut-18) | Choke Size            |

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