

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

|  |  |   |
|--|--|---|
| <sup>1</sup> Operator Name and Address<br>Avon Energy Corporation<br>20 N. Broadway, Suite 1500<br>Oklahoma City, Oklahoma 73102 |  | <sup>2</sup> OGRID Number<br>1332   |
|  |  | <sup>3</sup> Reason for Filing Code<br>CO eff. 8/1/93 Avon has been operator of this well since 3/3/91. |
| <sup>4</sup> API Number<br>30-015-26656  | <sup>5</sup> Pool Name<br>GRAYBURG JACKSON SR-Q-G-SA | <sup>6</sup> Pool Code<br>28509   |
| <sup>7</sup> Property Code<br><del>10000014</del> 160'   | <sup>8</sup> Property Name<br>Max Friess MA          | <sup>9</sup> Well Number<br>5   |

II <sup>10</sup> Surface Location

|                    |               |                 |              |         |                       |                       |                      |                     |                        |
|--------------------|---------------|-----------------|--------------|---------|-----------------------|-----------------------|----------------------|---------------------|------------------------|
| UI or lot no.<br>A | Section<br>30 | Township<br>17S | Range<br>31E | Lot.Idn | Feet from the<br>1270 | North/South Line<br>N | Feet from the<br>100 | East/West Line<br>E | County<br>EDDY CO., NM |
|--------------------|---------------|-----------------|--------------|---------|-----------------------|-----------------------|----------------------|---------------------|------------------------|

<sup>11</sup> Bottom Hole Location

|                        |                                     |          |                                   |         |                                   |                  |                                    |                |                                     |
|------------------------|-------------------------------------|----------|-----------------------------------|---------|-----------------------------------|------------------|------------------------------------|----------------|-------------------------------------|
| UI or lot no.          | Section                             | Township | Range                             | Lot.Idn | Feet from the                     | North/South Line | Feet from the                      | East/West Line | County                              |
| <sup>12</sup> Lse Code | <sup>13</sup> Producing Method Code |          | <sup>14</sup> Gas Connection Date |         | <sup>15</sup> C-129 Permit Number |                  | <sup>16</sup> C-129 Effective Date |                | <sup>17</sup> C-129 Expiration Date |

III. Oil and Gas Transporters

|                                    |   |                   |                   |   |
|------------------------------------|---|-------------------|-------------------|---|
| <sup>18</sup> Transporter<br>OGRID | <sup>19</sup> Transporter Name<br>and Address                 | <sup>20</sup> POD | <sup>21</sup> O/G | <sup>22</sup> POD ULSTR Location<br>and Description |
| 18053                              | Pride Pipeline Company<br>P. O. Box 2436<br>Abilene, TX 79604 | 492410            | O                 |   |
|                                    |   |                   |                   |   |
|                                    |   |                   |                   |   |
|                                    |   |                   |                   |   |
|                                    |   |                   |                   |   |
|                                    |   |                   |                   |   |
|                                    |   |                   |                   |   |

RECEIVED  
APR 20 1995  
OIL CON. DIV.  
DIST. 2

IV. Produced Water

|                   |  |
|-------------------|--|
| <sup>23</sup> POD | <sup>24</sup> POD ULSTR Location and Description |
|-------------------|--|

V. Well Completion Data

|                         |                                    |                         |                            |                            |
|-------------------------|------------------------------------|-------------------------|----------------------------|----------------------------|
| <sup>25</sup> Spud Date | <sup>26</sup> Ready Date           | <sup>27</sup> TD        | <sup>28</sup> PBTD         | <sup>29</sup> Perforations |
| <sup>30</sup> Hole Size | <sup>31</sup> Casing & Tubing Size | <sup>32</sup> Depth Set | <sup>33</sup> Sacks Cement |                            |
|                         |                                    |                         |                            |                            |
|                         |                                    |                         |                            |                            |
|                         |                                    |                         |                            |                            |
|                         |                                    |                         |                            |                            |

VI. Well Test Data

|                            |                                 |                         |                           |                             |                             |
|----------------------------|---------------------------------|-------------------------|---------------------------|-----------------------------|-----------------------------|
| <sup>34</sup> Date New Oil | <sup>35</sup> Gas Delivery Date | <sup>36</sup> Test Date | <sup>37</sup> Test Length | <sup>38</sup> Tbg. Pressure | <sup>39</sup> Csg. Pressure |
| <sup>40</sup> Choke Size   | <sup>41</sup> Oil               | <sup>42</sup> Water     | <sup>43</sup> Gas         | <sup>44</sup> AOF           | <sup>45</sup> Test Method   |

I hereby certify that the rules of the Oil Conservation division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  
Signature: Karen Rosa  
Printed Name: Karen Rosa  
Title: Engineering Technician  
Date: 14-Apr-95

Approved by: [Signature]  
Title: District Supervisor  
Approval Date: 4/26/95

Phone: (405) 552-4527

|  |              |       |      |
|--|--------------|-------|------|
| <sup>46</sup> If this is a change of operator fill in the OGRID number and name of the previous operator |              |       |      |
| Previous Operator Signature  | Printed Name | Title | Date |