

| | |
|------------------------|------------|
| NO. OF COPIES RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G.S. | |
| LAND OFFICE | |
| TRANSPORTER | OIL GAS |
| OPERATOR | |
| PRORATION 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-110
Effective 1-1-65

RECEIVED

FEB 28 1975

| | | |
|--|--|-------------------------------------|
| Operator | Read & Stevens, Inc. ✓ | D.C.C. ARTESIA, OFFICE |
| Address | P.O. Box 2126, Roswell, New Mexico 88201 | |
| Reason(s) for filing (Check proper box) | Other (Please explain) | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: | |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> | Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> | Condensate <input type="checkbox"/> |

If change of ownership give name and address of previous owner

| | | | |
|--------------------------------|----------|---|-----------|
| DESCRIPTION OF WELL AND LEASE | | Kind of Lease | Lease No. |
| Lease Name | Well No. | State, NEW MEXICO TEXAS | L-2502 |
| Mesa Com | 1 | | |
| Pool Name, Including Formation | | | |
| Cemetery Morrow | | | |
| Location | | | |
| Unit Letter | F | 1980 Feet From The North Line and 1980 Feet From The West | |
| Line of Section | 20 | Township 20S Range 25E, NMPM, Eddy County | |

| | | | |
|--|----------------------------------|--|-------------------|
| 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 <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> | | P.O. Box 175, Artesia, New Mexico 88210 | |
| Navajo Crude Oil Purchasing Company | | Address (Give address to which approved copy of this form is to be sent) | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | | P.O. Box 236, Midland, Texas 79701 | |
| Natural Gas Pipeline Company of America | | Is gas actually connected? When | |
| If well produces oil or liquids, give location of tanks. | Unit F Sec. 20 Twp. 20S Rge. 25E | No Yes | February 28, 1975 |

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

| | | | | | | | | | |
|--------------------------------------|-----------------------------|-----------------|----------|-------------------|----------|--------|-----------|--------------|---------------|
| COMPLETION DATA | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'tv. | Diff. Res'tv. |
| Designate Type of Completion - (X) | | | X | X | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | | P.B.T.D. | | | | | |
| 6/16/74 | 8/29/74 | 9778' | | 9710' | | | | | |
| Elevations (DF, RKB, RT, CR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | | Tubing Depth | | | | | |
| 3522' RKB | Morrow Sand | 9585' | | 9541' | | | | | |
| Perforations | | | | Depth Casing Shoe | | | | | |
| 9585'-9594' w/22 - 1 1/2" holes | | | | 9762' RKB | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | SACKS CEMENT | | | | | |
| 17 1/2" | 13 3/8" | 205' RKB | | 300 sx. | | | | | |
| 12 1/4" | 8 5/8" | 3250' RKB | | 1200 sx. | | | | | |
| 7 7/8" | 5 1/2" | 9762' RKB | | 400 sx. | | | | | |
| | 2 3/8" | 9541' | | | | | | | |


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)

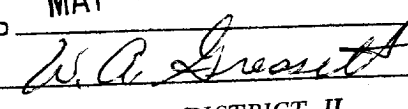
| | | | |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| 8/23/74 | 8/23/74 | Flowing | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| 24 hrs. | 140 PSI | Packer | 1/2 |
| Actual Prod. During Test | Off-Bbls. | Water-Bbls. | Gas-MCF |
| -0- | -0- | -0- | 1,000 |

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| GAS WELL | | Bbls. Condensate/MMCF | Gravity of Condensate |
| Actual Prod. Test-MCF/D | Length of Test | -0- | -0- |
| 1,000 2350 | 4 3/4 hrs. | | |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| 4 psi | 140 PSI 2281 | Packer | Venous 1 1/2 |

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.


(Signature)
Production Clerk
(Title)
February 26, 1975
(Date)

| | |
|--|--|
| OIL CONSERVATION COMMISSION | |
| MAY 12 1975 | |
| APPROVED | 19 |
| BY |  |
| 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. | |