NO. OF COPIES RECEIVED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE Supersedes Old C-104 and C-110 Effective 1-1-65 REQUEST FOR ALLOWABLE FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER 1 RECEIVED OPERATOR PRORATION OFFICE MAR 3 J 1957 Harvey E. Yates U. C. C. 305 Carper Bldg., Artesia, New Mexico Reason(s) for filing (Check proper box) Other (Please explain) ARTESIA, UFFICE Thomas in Transporter of: iner mpletion $\mathbb{F}_{\leq Y} \hookrightarrow n$ The main weership lasinghead Gas If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Well Mc. Foot Mame, Including Formation State, Federal or Fee Stebbins Deep Fed at l | Scanlon Delaware Dederal 1980 Feet From The North Line and 990 East Feet From The Line of Section 30 , Township 20S Range 29E , NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Mame of Authorized Transporter of Cil This is a temporary sale for fuel for drilling well the of Authorized Transporter of Casinghead Gas cripy Gas X Authorized Transporter Order Transporter of Casinghead Gas Cripy Gas X Authorized Transporter of Casinghead Gas Cripy Gas X Authorized Transporter Order Tran 321 Pan American Bldg., Tulsa, Oklahoma Noble Drilling Corp. Is gas actually connected? If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: . COMPLETION DATA Designate Type of Completion = (X) Togs Tell New Well Worksver Flug Back Same Res'v. Diff. Res'v. Date Compl. Heady to Frod. Total Depth F.P.T.D. Name of Producing Cormation Top Cil/Cas Pay Tubing Depth Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE HOLE SIZE SACKS CEMENT (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OH. WELL Late Pirat New Call Bun To Tanks Producing Method (Flow, pump, gas lift, etc.) Length of Test Tabina Pressure Casing Pressure Choke Size Astud Fred. During Test Oil-Ubis. Water-Bbls Gas-MCF GAS WELL Artud Frod. Test-MCF/D Length of Test Bbls. Contensate/MMCF Gravity of Condensate

VI. CERTIFICATE OF COMPLIANCE

Testing !!ethod (pitot, back pr.)

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.

Tubing Pressure

L'Eli Ulle X
(Signature)

Bookkeeper

(Title)

March 30, 1967

(Date)

OIL CONSERVATION COMMISSION

Casing Pressure

TITLE .

APPROVED ______ , 19 _____

Choke Size

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 Sections I, II, III, and VI only 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.