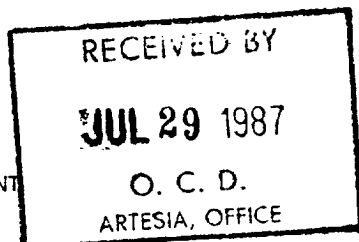


STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator INDREX, Inc.		CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>8-30-87</u>
Address 7633 E. 63rd Place, Suite 500, Tulsa, Oklahoma 74133		UNLESS AN EXCEPTION FROM THE B. L. M. IS OBTAINED
Reason(s) for filing (Check proper box) <input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership		Other (Please explain) Re-entry of INEXCO Oil Company Four Forks Unit #1
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas		<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Four Forks Federal	Well No. 1	Pool Name, including Formation Wildcat - <u>Bon Springs</u>	Kind of Lease State, Federal or Fee Federal	Lease No. NM-65387
Location Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>15</u> Township <u>22-S</u> Range <u>25-E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Navajo Refining Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 159, Artesia, New Mexico 88210</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Not Designated</u>	Address (Give address to which approved copy of this form is to be sent) <u>Post ID 2</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>H</u>	Sec. <u>15</u>
	Twp. <u>22</u>	Rge. <u>25</u>
	Is gas actually connected? <u>No</u>	When <u>August 1, 1987</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Mickey Bolton  
(Signature)  
Agent for INDREX, Inc.  
(Title)  
7-9-87  
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 30 1987, 19 \_\_\_\_\_  
BY \_\_\_\_\_ Original Signed By  
Les A. Clements  
TITLE \_\_\_\_\_ Supervisor District \_\_\_\_\_

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.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well	Workover Re-entry	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 6-12-87	Date Compl. Ready to Prod. 6-19-87		Total Depth 10860'		P.B.T.D. 4933'				
Elevations (DF, RKB, RT, CR, etc.) 3471' Gr	Name of Producing Formation Bone Springs		Top Oil/Gas Pay 4320' 4345'		Tubing Depth 4257'				
Perforations 4345'-4419'						Depth Casing Shoe 4933'			

#### TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
Existing down hole	13-3/8"	490'	500 SX
casing	9-5/8"	2175'	950 SX
8-3/4"	5-1/2"	4933'	795 SX
	2-3/8"	4257'	None

#### 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 allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 6-19-87	Date of Test 6-28-87	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hrs	Tubing Pressure 30 psi	Casing Pressure 0 psi	Choke Size 34/64"
Actual Prod. During Test	Oil-Bbls. 55	Water-Bbls. 59	Gas-MCF 123

#### GAS WELL

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