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| LAND OFFICE | <input type="checkbox"/> |
| TRANSPORTER | OIL <input checked="" type="checkbox"/> GAS <input checked="" type="checkbox"/> |
| OPERATOR | <input checked="" type="checkbox"/> |
| PRORATION OFFICE | <input type="checkbox"/> |

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-11.
Effective 1-1-85

| | |
|---|---|
| Operator The Superior Oil Co. | |
| Address 9 Greenway Plaza -- Suite 2700 - Houston, TX 77046 | |
| 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

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------|--|---|-----------------------|
| Lease Name Government "D" | Well No. 10 | Pool Name, including Formation Avalon-Bone Spring, East | Kind of Lease State, Federal or Fee Federal | Lease No. NM-17095 |
| Location | | | | |
| Unit Letter <u>A</u> : <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> | | | | |
| Line of Section <u>12</u> Township <u>21-S</u> Range <u>27-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"/> | Address (Give address to which approved copy of this form is to be sent) | |
| The Permian Corp. | Box 1183, Houston, TX 77001 | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| Phillips Petroleum Co. | Phillips Bldg., Bartlesville, OK 74004 | |
| If well produces oil or liquids, give location of tanks. | Unit NE/NW 12 | Sec. 21S |
| | Twp. 27E | Rge. 27E |
| | Is gas actually connected? | When |
| | Yes | 10-25-85 |

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

IV. COMPLETION DATA

| | | | | | | | | |
|---|--|-----------------------------------|--|-----------------------------------|---------------------------------|------------------------------------|--------------------------------------|---------------------------------------|
| Designate Type of Completion - (X) | Oil Well <input checked="" type="checkbox"/> | Gas Well <input type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res'v. <input type="checkbox"/> | Diff. Res'v. <input type="checkbox"/> |
| Date Spudded 9-13-85 | Date Compl. Ready to Prod. 10-21-85 | | Total Depth 5735 | | P.B.T.D. 5690 | | | |
| Elevations (DF, RKB, RT, GR, etc.) KB 3201 GL 3189 | Name of Producing Formation Bone Spring | | Top Oil/Gas Pay 5607 | | Tubing Depth 5393 | | | |
| Perforations 5607-5630 | | | | | Depth Casing Shoe | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17-1/2 | 13-3/8 | | 660 | | 650x (858 cf) | | | |
| 12-1/4 | 8-5/8 | | 2708 | | 1500x (2568 cf) | | | |
| 7-7/8 | 5-1/2 | | 5735 | | 1150x (1861 cf) | | | |

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 10-21-85 | Date of Test 10-25-85 | Producing Method (Flow, pump, gas lift, etc.) flow | |
| Length of Test 24 hrs | Tubing Pressure 610 | Casing Pressure 0 | Choke Size 16/64" (X) |
| Actual Prod. During Test | Oil - Bbls. 113 | Water - Bbls. 8 | Gas - MCF 131 |

GOR 1159.1

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-------------------------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MCF | Gravity of Condensate 44.4 @ 60° |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

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.

Nancy Lewis
(Signature)
MOBILE PRODUCING TX & NM, INC.
AS AGENT FOR THE SUPERIOR OIL COMPANY
(Title)
10-30-85
(Date)

OIL CONSERVATION COMMISSION

NOV 6 1985

APPROVED _____, 19____
BY _____ Original Signed By
Les A. Clements
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