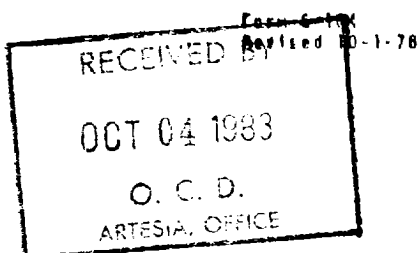


OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501



REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR  
Baruch-Foster Corporation

Address  
One Energy Square/4925 Greenville Avenue/Dallas, Texas 75206

Reason(s) for filing (Check proper box) Other (Please explain)

New Well ☐ Change in Transporter of:  
Recompletion ☐ Oil ☐ Dry Gas ☐  
Change in Ownership ☒ Casinghead Gas ☐ Condensate ☐

If change of ownership give name and address of previous owner: Delta Drilling Company/3100-C North "A"/Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name: Allen  
Well No.: 1  
Pool Name, Including Formation: Carlsbad Morrow, South (Gas)  
Kind of Lease: State, Federal or Fee Fee  
Location:  
Unit Letter: J  
1980 Feet From The South Line and 1980 Feet From The East  
Line of Section: 31 Township: 22S Range: 27E NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☒  
The Permian Corporation  
Address (Give address to which approved copy of this form is to be sent): Box 1183/Houston, Texas 77001  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒  
El Paso Natural Gas Company  
Address (Give address to which approved copy of this form is to be sent): Box 1492/El Paso, Texas 79978  
If well produces oil or liquids, give location of tanks:  
Unit: J Sec: 31 Twp: 22S Rge: 27E  
Is gas actually connected? Yes  
When: October, 1971

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)  
Date Spudded: Date Compl. Ready to Prod.: Total Depth: F.B.T.D.:  
Elevations (DF, RKB, RT, GR, etc.): Name of Producing Formation: Top Oil/Gas Key: Tubing Depth:  
Perforations: Depth Casing Shoe:

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|--------------|
|           |                      |           |              |
|           |                      |           |              |
|           |                      |           |              |
|           |                      |           |              |

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)

Oil Well  
Date First New Oil Run To Tanks: Date of Test: Producing Method (Flow, pump, gas lift, etc.):  
Length of Test: Tubing Pressure: Casing Pressure: Choke Size:  
Actual Prod. During Test: Oil - Bbls.: Water - Bbls.: Gas - MCF

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:

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 above is true and complete to the best of my knowledge and belief.

(Signature) W. J. Newman

Senior Vice-President - Production

September 26, 1983

(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 25 1983

Original Signed By  
BY Leslie A. Clements

TITLE Supervisor District II

This form is to be filed in compliance with Rule 111.  
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 change of owner, well name or number, or transporter, or other such change of conditions.

Separate Form C-104 must be filed for each pool in multi-pool wells.