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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | | |
|--|--|------------------------------|
| Operator RB Operating Company | | Well API No. 30-015-26348 |
| Address 2412 N. Grandview, Suite 201, Odessa, Texas 79761 | | |
| Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) RECEIVED Recompletion <input type="checkbox"/> Change in Transporter of: CASINGHEAD GAS MUST NOT BE Change in Operator <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> FLAMED AFTER 9/3/90 Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> JUL 2 1990 | | |
| If change of operator give name and address of previous operator | | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|-----------|
| Lease Name South Culebra Bluff 23 | Well No. 7 | Pool Name, including Formation East Loving (Delaware) | Kind of Lease State, Federal or Fee | Lease No. |
| Location Unit Letter J : 1750 Feet From The East Line and 1950 Feet From The South Line Section 23 Township 23S Range 28E, NMPM, Eddy 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"/> The Permian Corporation | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 Houston, Texas 77001 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492 El Paso, Texas 79978 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 23 | Twp. 23S | Rge. 28E | Is gas actually connected? No | When? |

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 5/17/90 | Date Compl. Ready to Prod. 5/27/90 6870 | | Total Depth 6300' | | P.B.T.D. 6283' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3002 GR. | Name of Producing Formation Delaware | | Top Oil/Gas Pay 6138 | | Tubing Depth 6052 | | | |
| Perforations 6138-6240 | | | | | Depth Casing Shoe 6300 | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12-1/4" | 8-5/8" | | 542 | | 350 sxs | | | |
| 8-7/8" | 5-1/2" | | 6300 | | 1600 sxs | | | |

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 Tank 6/9/90 | Date of Test 6/24/90 | Producing Method (Flow, pump, gas lift, etc.) Flowing | |
| Length of Test 24 | Tubing Pressure 50 | Casing Pressure 0 | Choke Size 22/64 |
| Actual Prod. During Test 78 | Oil - Bbls. 78 | Water - Bbls. 68 | Gas - MCF 75 |

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. OPERATOR 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
F.D. Schoch Area Manager
Printed Name
6/28/90 (915) 362-6302
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 29 1990

By ORIGINAL SIGNED BY
MUE WILLIAMS
SUPERVISOR, DISTRICT II

Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each production test.