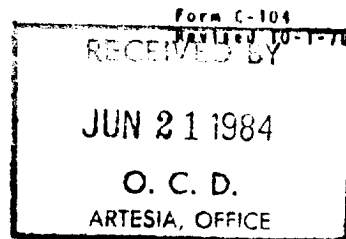


OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Worth Petroleum Company ✓

P O Box 17406, Fort Worth, TX 76102

Reason(s) for filing (Check proper box)

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

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Amoco-Federal	5	Brushy Draw-Delaware	State, Federal or Fee Federal	NM38636

Unit Letter A : 990 Feet From The north Line and 330 Feet From The eastLine of Section 27 Township 26S Range 29E , NMPM, Eddy County

SIGNATURE OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)

The Permian Corp

P O Box 1183, Houston, TX 77001

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐

Address (Give address to which approved copy of this form is to be sent)

Conoco, Inc

P O Box 2197, Houston, TX 77001

Well produces oil or liquids,
or location of tanks.

Unit	Sec.	Twp.	Rge.
I	27	26S	29E

Is gas actually connected? yes When 6/3/84

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

PRODUCTION DATA

Designate Type of Completion - (X)	Oil well	Gas well	New Well	Workover	Deepen	Plug Back	Same Resv.	Diff. Resv.
	☒		☒					
Re Spudded <u>4-18-84</u>	Date Compl. Ready to Prod. <u>6/3/84</u>	Total Depth <u>5125</u>	P.B.T.D. <u>5061</u>					
Productions (LF, RAB, RT, GR, etc.) <u>2878.4 GR</u>	Name of Producing Formation <u>Brushy Draw Delaware</u>	Top Oil/Gas Pay <u>4920 4944</u>	Tubing Depth <u>5044</u>					
Productions <u>4944, 47, 50, 59, 61, 68, 70, 79, 81, 83, 88, 90, 5001, 3, 5, 7, 9, 13, 15, 17, 19, 21, 23, 25,</u>		<u>30, 31</u>	Depth Casing Shoe <u>5096</u>					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<u>12 1/4</u>	<u>8-5/8</u>	<u>512.33</u>	<u>300</u>
<u>7-7/8</u>	<u>5 1/2</u>	<u>5096</u>	<u>350</u>
	<u>2-7/8</u>	<u>5044</u>	

TEST DATA AND REQUEST FOR ALLOWABLE 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)

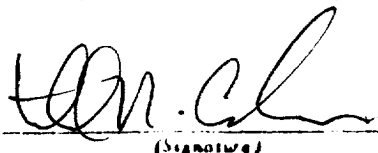
Start New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
<u>6/3/84</u>	<u>6/4/84</u>	<u>pump</u>	
Length of Test <u>24 hrs</u>	Tubing Pressure <u>-</u>	Casing Pressure <u>140</u>	Choke Size <u>1/2"</u>
Oil Prod. During Test <u>92</u>	Oil-Bbls. <u>92</u>	Water-Bbls. <u>310</u>	Gas-MCF <u>47 mcf</u>

WELL

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

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.



(Signature)

President

(Title)

June 18, 1984

OIL CONSERVATION DIVISION

APPROVED JUN 29 1984, 19Original Signed By
BY Leslie 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 1111.

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.