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State of New Mexico Energy, Minerals and Natural Resources Department

Revised 1-1-89 See Instructions at Bottom of Page

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Biazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well Al'I No. Operator Amax Oil & Gas Inc. 300392313400D1 Address P.O. Box 42806, Houston, TX 77042 Other (Please explain) Reason(s) for Filing (Check proper box) New Well Change in Transporter of: Dry Gas Recompletion XX Casinghead Gas Condensate Change in Operator If change of operator give name and address of previous operator Ladd Petroleum Corp., 370 17th St., Ste. 1700, Denver, CO 80202-5617 II. DESCRIPTION OF WELL AND LEASE Kind of Lease Well No. Pool Name, Including Formation Lease No. Lease Name State, Federal or Fee USA-NM-079161 110E Lindrith Largo Gallup Location 1010 Feet From The North Line and 1650 West Feet From The Line Unit Letter ... 26N Arriba , NMPM, County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate Gary Williams Energy Corp.

Name of Authorized Transporter of Casinghead Gas (X)370 17th St.,Ste.5300,Denver,CO 80202 or Dry Gas X Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, TX 79978 El Paso Natural Gas Company If well produces oil or liquids, Unit Twp. Rge. is gas actually connected? When ? Sec. l C 110 [26N] August, 7 W If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Diff Res'v Designate Type of Completion - (X) Date Spaidded P.B.T.D. Date Compl. Ready to Prod. Top Oil/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE 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.) Producing Method (Flow, pump, gas lyt, etc.) Date First New Oil Run To Tank Date of Test Length of Test Casing Pressure Tubing Pressure Actual Prod. During Test Water - Bbls. AUG1 2 1991 OIL CON. DIV. GAS WELL Gravity of Con PIST. 3 Actual Fred. Test - MCF/D Length of Test Bbls. Condensate/MMCF Choke Size Tubing Pressure (Shut-in) Casing Pressure (Shut in) lesting Method (pitot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION 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. AUG 1 2 1991 Date Approved _____ Sherry Vasek Analyst

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

Printed Name

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title.

SUPERVISOR DISTRICT #3

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

<u> 78-7700</u>

3) Uill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.