| property and a second |          |  |  |
|-----------------------|----------|--|--|
| HO, OF CAPIES HEE     |          |  |  |
| DISTRIBUTION          |          |  |  |
| SAHTA P.C.            |          |  |  |
| FILL                  |          |  |  |
| U.S.G.S.              | U.S.G.S. |  |  |
| LAND OFFICE           |          |  |  |
| IRAL PORTER           | OIL      |  |  |
|                       | GAS      |  |  |
| OPERATOR              |          |  |  |
| PRORATION OFFICE      |          |  |  |

| Dirm C-104               |       |
|--------------------------|-------|
| Supersedes Old C-104 and | C-11: |
| Utleastive L.L.C.        |       |

| Location   Unit Letter   B   1010   Feet From The   North   Line and   1670   Feet From The   East   |  | SARTA PE  FILL  U.S.G.S.  LAND OFFICE  IRAN PORTER OIL | REQUEST   | COLLERVATION COMMISSION FOR ALLOWABLE AND ANSPORT OIL AND NATURAL (  | Ditm C-104 Supersedes Old C-104 and C-11 Effective 1-1-65 |  |  |  |
|--|--|--|---|--|---|--|--|--|
| P. O.D rawer 570, Farmington, New Mexico 87499  Resolution thing (Carch emper best)  Resolution to Carchemate the Carchemate of Condensate the Carchemate of Condensate the Carchemate of Condensate the Carchemate and address of previous owners  II. Charge for an emperation to Carchemate the Carchemate of Condensate the Carchemate of Carchemate the Carc | ī.   | OPERATOR PRORATION OFFICE Operator                     |   |  |   |  |  |  |
| Research   In filling (First Ampire Box)   Seek     |  | Address  |   | To the state of th | ) EGEIVEIII   |  |  |  |
| Section   Continue     |  |  |   |  | OFD 1 3 1984  |  |  |  |
| ### BEST CASING AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of food off and must be agual to or exceed top a first fi |  | Recompletion   | CII Dry Go  | 25 <u> </u>  | OIL CON. DIV  |  |  |  |
| Leges Name   Jicari   1a 449   1   Choza Mesa Pictured Cliffs   Store, Federal of Fee Federal Jic. 4   |  |  |   |  | UIS1  |  |  |  |
| Jicarilla 449   1   Choza Mesa Pictured Cliffs   Store, Federal or Fee Federal   Jic., 4   | 11.  |  |   |  |   |  |  |  |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Notice of Authorized Transporter of Oil (L) or Condensate   Andrews (Give address to which approved copy of this form is to be sent)   Glatt Refining Company  |  | Jicarilla 449  | 1 Choza Mesa Pi   | ictured Cliffs State, Federa   | 2020  |  |  |  |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Notice of Authorized Transporter of Oil  |  |  |   |  |   |  |  |  |
| Source of Authorized Transporter of Oil   Oil or Condensate   P.O. Box 9156, Phoenix, Arizona 85068  |  | Line of Section 30 Tov                                 | vnship 28N Range  | 3W , NMPM, Rio Ar  | riba County   |  |  |  |
| Norme of Authorited Transporter of Casingas-Casilla and Casilla Casill | ш.   |  |   |  | ved copy of this form is to be sent)                      |  |  |  |
| If well produces oil or liquids, quite location of traits.  No  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.  Elevations /DF, RAB, RT, GR, etc., Name of Producing Formation  Total 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 a able for this depth or be for full 24 hours)  Length of Test  Length of Test  Actual Prod. Test: NCF/D  Length of Test  CASING Pressure  Casing Pressure  Chie Bits.  Water-Bbis.  CONSERVATION COMMISSION   |  |  |   | P.O. Box 9156, Phoenix, Address (Give address to which approx  | Arizona 85068  ved copy of this form is to be sent)       |  |  |  |
| No   No   No   No   No   No   No   No  |  | El Paso Natural Gas                                    |   |  |   |  |  |  |
| Designate Type of Completion — (X)  Designate Type of Completion — (X)  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Date Compl. Ready to Prod.  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Depth Casing Shoe  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING A 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 a able for this depth or be for full 24 hours)  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Chicke Size  Gas MELL  Actual Prod. During Test  Date of Test  Date of Test  Restrict New Cit Run To Tonks  Date of Test  Date of Test  Casing Pressure  Chicke Size  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Chicke Size  OIL CONSERVATION COMMISSION   |  |  | i i i i i   |  |   |  |  |  |
| Designate Type of Completion — (X)  Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RAB, RT, GR, etc., Name of Producing Formation  Top Oil/Gas Pay  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  Allowable for this depth or be for full 24 hours?  Date First New Cil Run To Tanks  Date of Test  Producing Method (Flow, pump, gas life, etc.)  Length of Test  Actual Prod. During Test  Oil-Bbis.  Water-Bbis.  Gas-MCF  Casing Pressure (Shut-in)  Choke Size  |  |  |   |  | Plug Back   Same Res'v.   Diff. Res'v.                    |  |  |  |
| Elevations (DF, RAB, RT, GR, etc.)  Name of Producing Formation  Top Oil/Gas Pay  Tubing Depth  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 a able for this depth or be for full 24 hours)  Tate First New Cil Run To Tanks  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Gas-MCF  Testing Method (pitor, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  OIL CONSERVATION COMMISSION  |  | Designate Type of Completio                            |   |  |   |  |  |  |
| Perforations  TUBING, CASING, AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  Date First New Cil Run To Tanks  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Actual Prod. Test-MCF/D  Length of Test  Bbls. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-ia)  Casing Pressure (Shut-ia)  Conservation Conservation Commission  Conservation Conservation Commission  Conservation Conservation Commission  Conservation Commission  Conservation Commission  Conservation Commission  Conservation Commission  |  | Date Spudded   | Date Compl. Ready to Prod.  | Total Depth  | P.B.T.D.  |  |  |  |
| 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 a OII. WELL able for this depth or be for full 24 hours)  Date First New Cil 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 (pitot, back pr.) Tubing Pressure (Shut-is) Casing Pressure (Shut-is) Choke Size   |  | Elevations (DF, RKB, RT, GR, etc.,                     | Name of Producing Formation   | Top Oil/Gas Pay  | Tubing Depth  |  |  |  |
| HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OII. WELL  Date First New Cil Run To Tanks  Date of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  OII-Bbis.  Water-Bbis.  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Condensate  OII CONSERVATION COMMISSION   |  | Perforations   |   |  | Depth Casing Shoe   |  |  |  |
| V. TEST DATA AND REQUEST FOR ALLOWABLE OIL, WELL OIL, WELL Date First New Cit Run To Tanks  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  Gas-MCF  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bile. Condensate/MMCF  Gravity of Condensate  Testing Method (pitat, back pr.)  Tubing Pressure(shut-in)  Casing Pressure(shut-in)  Casing Pressure(shut-in)  Casing Pressure(shut-in)  Condensate(shut-in)  |  | HO! E \$175  |   | · · · · · · · · · · · · · · · · · · ·  | SACKS CEMENT  |  |  |  |
| OII. WELL  Date First New Cil 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-Bbis.  Water-Bbis.  Gas-MCF  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size   |  | NOCE 3125  | CASING & LOSING SIZE  |  |   |  |  |  |
| OII. WELL  Date First New Cil 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-Bbis.  Water-Bbis.  Gas-MCF  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size   |  |  |   |  |   |  |  |  |
| OII. WELL  Date First New Cil 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-Bbis.  Water-Bbis.  Gas-MCF  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size   | ٠.   | TEST DATA AND DEOUTST FO                               | DR ALLOWARIE (Test must be a  | free recovery of total values of land oil  | and must be equal to or exceed top allows                 |  |  |  |
| Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil-Bbis.  Water-Bbis.  Gas-MCF  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (shut-in)  Casing Pressure (shut-in)  Choke Size  Oil CONSERVATION COMMISSION  | ٧.   | OIL WELL   | able for this de  | pth or be for full 24 hours)   |   |  |  |  |
| Actual Prod. During Test  Cil-Bbis.  Water-Bbis.  Gas-MCF  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  CIL CONSERVATION COMMISSION  |  | Light Hat Hew Cit Hair to Tunks                        | :   |  |   |  |  |  |
| GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbls. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  OIL CONSERVATION COMMISSION   |  | Length of Test   | Tubing Pressure   | Casing Pressure  | Choke Size  |  |  |  |
| Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (shut-in)  Casing Pressure (shut-in)  Choke Size  OII CONSERVATION COMMISSION   |  | Actual Prod. During Test                               | OII-Bbis.   | Water-Bbls.  | Gas-MCF   |  |  |  |
| Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (shut-in)  Casing Pressure (shut-in)  Choke Size  OII CONSERVATION COMMISSION   |  | GAS WELL   |   |  |   |  |  |  |
| AL CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION   | ;  |  | Length of Test  | Bbls. Condensate/MMCF  | Gravity of Condensate                                     |  |  |  |
| VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION  |  | Testing Method (pitot, back pr.)                       | Tubing Pressure (Shut-is)   | Casing Pressure (Shut-in)  | Choke Size  |  |  |  |
|  | V1.  | CERTIFICATE OF COMPLIANCE                              |   | OIL CONSERVA   | TION COMMISSION   |  |  |  |
| I hereby certify that the rules and regulations of the Oil Conservation  Commission have been complied with and that the information given  Original Signed by FRANK I. CHAVEL   | 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. |  |   | Original Signed by FRANK 1. CHAVEE   |   |  |  |  |
| SUPERVISOR DISTRICT # 3  |  |  |   |  |   |  |  |  |
| This form is to be filed in compliance with RULE 1104.   | Cithe Quenera  |  | 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. |  |   |  |  |  |
|  | (Signature) (Secretary   |  |   |  |   |  |  |  |
| tests taken on the well in accordance with RULE 111.   | (Title)  |  |   |  |   |  |  |  |
| (Signature) Well, this form must be accompanied by a tabulation of the series taken on the well in accordance with RULE 111.   |  |  |   | All sections of this form must be filled out completely for silow-   |   |  |  |  |
| Secretary  All sections of this form must be filled out completely for all   | 9-13-84  |  |   | Fill out only Sections I, II, III, and VI for changes of owner,  |   |  |  |  |

(Date)

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 completed wells.