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| SANTA FE              |     |
| FILE                  |     |
| U.S.G.S.              |     |
| LAND OFFICE           |     |
| TRANSPORTER           | OIL |
|                       | GAS |
| OPERATOR              |     |
| PRODUCTION OFFICE     |     |

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**I. OPERATOR**

Operator: Ladd Petroleum Corporation

Address: 830 Denver Club Building, Denver, Colorado 80202

Reason(s) for filing (Check proper box)

|                     |                          |                           |                          |                        |                                     |
|---------------------|--------------------------|---------------------------|--------------------------|------------------------|-------------------------------------|
| New Well            | <input type="checkbox"/> | Change in Transporter of: |                          | Other (Please explain) |                                     |
| Recompletion        | <input type="checkbox"/> | Oil                       | <input type="checkbox"/> | Dry Gas                | <input type="checkbox"/>            |
| Change in Ownership | <input type="checkbox"/> | Casinghead Gas            | <input type="checkbox"/> | Condensate             | <input checked="" type="checkbox"/> |

If change of ownership give name and address of previous owner \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

|   |                      |   |   |                             |
|---|----------------------|---|---|-----------------------------|
| Lease Name<br><u>Federal "C"</u>  | Well No.<br><u>1</u> | Pool Name, including Formation<br><u>Basin Dakota</u> | Kind of Lease<br>State, Federal or Fee<br><u>XXX XXXX</u> | Lease No.<br><u>SF07397</u> |
| Location<br>Unit Letter <u>A</u> : <u>790</u> Feet From The <u>N</u> Line and <u>790</u> Feet From The <u>E</u> |                      |   |   |                             |
| Line of Section <u>30</u> Township <u>30N</u> Range <u>13W</u> , NMPM, San Juan County                          |                      |   |   |                             |

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

|  |  |
|--|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |
| <u>Inland Corporation</u>  | <u>P.O. Box 1528 Farmington, New Mexico 87401</u>                        |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| <u>El Paso Gas Company</u>   | <u>P.O. Box 1592, El Paso, Texas 79999</u>                               |
| If well produces oil or liquids, give location of tanks.   | Unit Sec. Twp. Rge. Is gas actually connected? 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                    | Gas Well | New Well        | Workover | Deepen | Plug Back    | Same Res'v.       | Diff. Res. |
| Date Spudded                       | Date Compl. Ready to Prod.  |          | Total Depth     |          |        | P.B.T.D.     |                   |            |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation |          | Top Oil/Gas Pay |          |        | Tubing Depth |                   |            |
| Perforations                       |                             |          |                 |          |        |              | Depth Casing Shoe |            |

**TUBING, CASING, AND CEMENTING RECORD**

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

**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 allowable for this depth or be for full 24 hours)

|                                 |                 |  |            |
|---------------------------------|-----------------|--|------------|
| Date First New Oil Run To Tanks | Date of Test    | Producing Method (Flow, pump, gas lifts, 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/MCF      | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shot-in) | Casing Pressure (Shot-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.

Denise B. McDonald  
(Signature)  
Senior Production Clerk  
(Title)  
March 30, 1982  
(Date)

OIL CONSERVATION DIVISION

APPROVED FRANK T. CHAVEZ 1982

BY Origin! Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT # 3

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 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 changes of owner well name or number, or transporter, or other such change of condition