

U.S.G.S. LAND OFFICE TRANSPORTER OIL GAS OPERATOR PRODUCTION OFFICE

REQUEST FOR ALLOWABLE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104 Supersedes Old C-104 and C-1 Effective 1-1-65

Operator Southland Royalty Company Address P.O. Drawer 570, Farmington, New Mexico 87499-0570 Reason(s) for filing (Check proper box) New Well [X] Change In Transporter of: Oil [] Dry Gas [] Recompletion [] Casinghead Gas [] Condensate [] Change In Ownership [] Other (Please explain) If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE Lease Name Nye Well No. 17-E Pool Name, including Formation Undesignated Gallup Kind of Lease State, Federal or Fee Federal Lease No. SF-078198 Location Unit Letter L 1860 Feet From The South Line and 1110 Feet From The West Line of Section 1 Township 30N Range 11W, NMPLM, San Juan County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Plateau, Inc. Address (Give address to which approved copy of this form is to be sent) 4775 Ind. Sch Rd N.E., Albuquerque, NM 87110 Name of Authorized Transporter of Casinghead Gas Southern Union Gathering Address (Give address to which approved copy of this form is to be sent) P.O. Box 1899, Bloomfield, New Mexico 87413 If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When No

If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Restv. Diff. Restv. Date Spudded 4-24-81 Date Compl. Ready to Prod. 8-7-81 Total Depth 7126' P.B.T.D. 7071' Elevations (DF, RKB, RT, GR, etc.) 5925' GR Name of Producing Formation Gallup Top Oil/Gas Pay 6154' Tubing Depth 6257' Perforations 6154'-6288' Depth Casing Shoe 7117' TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 13-3/4" 10-3/4" 201' 140 sacks 9-7/8" 7-5/8" 4670' 510 sacks (2 stages) 6-3/4" 5-1/2" 4501-7117' 294 sacks 2-3/8" 6257'

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 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 531 Length of Test 3 hours Bbls. Condensate/MMCF Gravity of Condensate Testing Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size Back Pressure 1159 1161 3/8"

CERTIFICATE OF COMPLIANCE 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. District Production Manager September 9, 1981

OIL CONSERVATION COMMISSION APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE 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. Separate Forms C-104 must be filed for each pool in multiply completed wells.