NO. OF COPIES RECEIVED DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION Form C -104 SANTA FE Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE Effective 1-1-65 FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER OPERATOR PRORATION OFFICE Setu Sevelopment Co. 234 Tetroleum Club Flaza, Farmington, New Mexico Reason(s) for filing (Check proper box) Other (Please explain) Hew West Change in Transporter of: Exercise, estical Dry Gas Charles in Cwhership Casinahead Gas Condensate 🐰 If change of ownership give name and address of previous owner ___ II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease 1 Basin Dakota State, Federal or Fed Charles Hutton oution. ; 1030 Feet From The North Line and 1185 Feet From The Line of Section 23 , Township 30 N Range 12 g , NMPM, an Juan III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Tame of Authorized Transporter of Oil La Mar Trucking, Inc. Name of Authorized Transporter of Casinghead Gas _____ or Dry Gas ____ P. i. Box 1528 Farmington liew Mexico Address (Give address to which approved copy of this form is to be sent) INLAND CORPORATION PURCHASTD ATLAHE ASSETS If well produce DE BOTH LOCART TRUCKIN , INC. AND INC. AND INC. AND INC. THE PURCHASE INCLUDED N. M. S. C. T. C. T If this production is compared with the form of the rease or por IV. COMPLETIBLE OF CORPORATION. Oil Well Graw Well Deepen Plug Back New Well Same Res'v. Diff. Res'v. Workover Designate Type of Completion -CAMDE C. LOMAR, PRESIDENT Date Compl. CORPORATION Lette Cynthed Total Depth P.B.T.D. Name of Producing Formation Top Oil/Gas Pay Tubing Depth Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE SACKS CEMENT CASING & TUBING SIZE DEPTH SET 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 top allowable for this depth or be for full 24 hours) OH, WELL Froducing Method (Flow, pump, gas lift, etc.) ate First New oil Hun To Tanks Date of Test Length of Test Tubing Pressure Casina Pressure Water-Bbls. Antoni Prol. During Test Oil-Bhls. MAR 9 1965 OIL GON. COM **GAS WELL** Actual Frod. Test-MCF/D Bbls. Condensate/MMCF Testing Method (pitot, back pr.) Tubing Pressure Casing Pressure Choke Size OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE MAR 9 1965 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. By Original Signed Emery C. Arnold

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

Fill out Sections I, II, III, and VI only 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

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.

TITLE Sugarities with g &

completed wells.

Original signed by

T. HAMPTON

(Signature) Manag**er**

(Title)

3-8-65