

RECEIVED

MAY 19 1982

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
ARTESIA, OFFICE

O. C. D.

|                        |                                     |
|------------------------|-------------------------------------|
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| SANTA FE               | <input checked="" type="checkbox"/> |
| FILE                   | <input checked="" type="checkbox"/> |
| U.S.G.S.               |                                     |
| LAND OFFICE            |                                     |
| TRANSPORTER            | <input checked="" type="checkbox"/> |
| OIL                    | <input checked="" type="checkbox"/> |
| NATURAL GAS            | <input checked="" type="checkbox"/> |
| OPERATOR               | <input checked="" type="checkbox"/> |
| PRODUCTION OFFICE      | <input checked="" type="checkbox"/> |

I. OPERATOR  
Cibola Energy Corporation

Address  
P. O. Box 1668, Albuquerque, NM 87103

Reason(s) for filing (Check proper box)

New Well ☒ Change in Transporter of: Oil ☒ Dry Gas ☐  
Recompletion ☐ Casinghead Gas ☐ Condensate ☐  
Change in Ownership ☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE  
FLAMED AFTER 12-1-82

UNLESS AN EXCEPTION TO RULE 1104  
IS OBTAINED

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

|   |                |   |  |           |
|---|----------------|---|--|-----------|
| Lease Name<br>J. P. White "D"   | Well No.<br>#5 | Pool Name, Including Formation<br>Race Track S.A. | Kind of Lease<br>State, Federal or Fee FEE | Lease No. |
| Location<br>Unit Letter M : 330 Feet From The South Line and 330 Feet From The West<br>Line of Section 20 Township 10S Range 28E, NMPM, Chaves, NM County |                |   |  |           |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |  |            |             |             |                                  |      |
|---|--|------------|-------------|-------------|----------------------------------|------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br>Navajo Crude Oil Purchasing Company | Address (Give address to which approved copy of this form is to be sent)<br>P. O. Box 159, Artesia, NM 88210 |            |             |             |                                  |      |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>   | Address (Give address to which approved copy of this form is to be sent)                                     |            |             |             |                                  |      |
| If well produces oil or liquids,<br>give location of tanks.   | Unit<br>M  | Sec.<br>20 | Twp.<br>10S | Rge.<br>28E | Is gas actually connected?<br>NO | 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 <input checked="" type="checkbox"/>   | Gas well <input type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Some Restv. <input type="checkbox"/> | Diff. Res. <input type="checkbox"/> |
| Date Spudded<br>October 22, 1981                     | Date Compl. Ready to Prod.<br>April 7, 1982    |                                   | Total Depth<br>2263'                         |                                   | P.B.T.D.                        |                                    |                                      |                                     |
| Elevations (DF, RKB, RT, CR, etc.)<br>3738.3 Gr      | Name of Producing Formation<br>Slaughter S. A. |                                   | Top Oil/Gas Pay<br>2248'                     |                                   | Tubing Depth<br>2250'           |                                    |                                      |                                     |
| Perforations<br>2250' - 2260' with 4 shots per foot. |  |                                   |  |                                   | Depth Casing Shoe<br>2248'      |                                    |                                      |                                     |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE                      | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT           |
|--------------------------------|----------------------|-----------|------------------------|
| 10"                            | 8 5/8" 24#           | 317'      | 140sx Class C cmt 2% C |
| 8"                             | 4 1/2" 9.5#          | 2248'     | 150sx Class C cmt 2% C |
| TUBING RECORD----- 2 3/8" 4.7# |                      | 2250'     |                        |

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 oil  
able for this depth or be for full 24 hours)

|  |                             |   |                     |
|--|-----------------------------|---|---------------------|
| Date First New Oil Run To Tanks<br>April 7, 1982 | Date of Test<br>May 1, 1982 | Producing Method (Flow, pump, gas lift, etc.)<br>Pump |                     |
| Length of Test<br>24 hours                       | Tubing Pressure             | Casing Pressure                                       | Choke Size<br>COMP. |
| Actual Prod. During Test<br>60 Barrels           | Oil-Bbls.<br>30 Barrels     | Water-Bbls.<br>30 Barrels                             | Gas-MCF<br>X        |

GAS WELL

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D          | Length of Test            | Bbls. Condensate/MMCF     | 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.

*C. P. Smith*  
(Signature)

Production Secretary  
(Title)

May 17, 1982  
(Date)

OIL CONSERVATION DIVISION

MAY 21 1982

APPROVED \_\_\_\_\_, 19

BY *W. A. Gressett*  
TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep  
well, this form must be accompanied by a tabulation of the devi  
tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of ow  
well name or number, or transporter, or other such change of condi

Separate Form C-104 must be filed for each pool in mul  
recompleted wells.