DISTRIBUTION				ATION	DIVISIO	лс	Form C-10 Revised 10 Format 08- Page 1	-01-78
Fill           U.S.G.J.           LAND OFFICE		SANTA F		BOX 2088 EW MEXI	CO 87501			
TRAUSPORTER DIL OPERATOR PROBATION DFFICE	AUTHOR			OR ALLOW AND NSPORT OIL		JRAL GAS		
Mobil Producing TX	& NM Inc.							
9 Greenway Plaza,	<u>Suite 2700</u>	), Housto	on, T	<u>x 77046</u>				
Reeson(s) for filing (Check proper box; Now Wall	)	Transporter (			Other (Pleas		Nama from	
Recompletion Change in Ownership	<b></b> 011	ighead Ges	E	Dry Gas Condensate	The S	ge Operator I Superior Oil	Company APF	1 1986 ;
f change of ownership give name T and address of previous owner	he Superio	or_Oil Co	ompan	y, 9 Gre	enway Pla	aza, Ste 270	O, Houston,	TX 77046
T DESCRIPTION OF WELL AND	D LEASE							the second s
I. DESCRIPTION OF WELL AN	D LEASE Well No.	Vada Pe		Formation		Kind of Lease State, Federal or	F•• Fee	
	D LEASE Well No.	Vada Pe		Formation			<b>r⊷</b> Fee	
Location	D LEASE Weil No. 1 30 Foot From	Vada Pe	nn		660		11	
Lorent Name Pruitt "A" Locention Unit Lotter E : 18:	1 weil No.	Vada Pe	nn		660 , NMP	State, Federal or Feet From The	11	NM-933-
Lorent Name Pruitt "A" Location Unit Letter E 18: Line of Section 22 Tox	30 Foot From mahip 95	Vada Pe	th Range	<b>Line and</b> 34E		State, Federal or Feet From The	West	NM-933-
Lorent Name Pruitt "A" Locention Unit Lotter E : 18:	30 Feet Free mahip 95	Vada Pe	nn th Range	<u>34E</u> <u>ALGAS</u> <u>Address</u> <u>302</u> E.	, NMP (Give address Ave. "A"	Signe, Federal or Feet From The M, to which approved Lovington.	Lea Copy of thus form to NM 88260	NM-933- County
Loreso Name Pruitt "A" Location Unit Letter E 18: Line of Section 22 Tow HI. DESIGNATION OF TRANSF Name of Authorized Transporter of Cit Amoco Pipeline Company Name of Authorized Transporter of Cat	30_Feet Free mship 95 PORTER OF C	Vada Pe	nn th Range JATUF	Address	, NMP (Give address Ave. "A" (Give address	State, Federal or Feet From The M, to which approved , Lovington, to which approved	West Lea copy of this form to NM 88260 copy of this form to	
Loreso Name Pruitt "A" Location Unit Letter <u>E</u> : <u>18</u> : Line of Section <u>22</u> Tow HI. DESIGNATION OF TRANSF Name of Authorized Transporter of Cit Amoco Pipeline Company Name of Authorized Transporter of Cat Warren Petroleum Cc. If well produces oil or liquide.	Weil No. 1 30 Feet Free mahip 95 PORTER OF ( C or Ce sungheed Gas (X Unit Sec.	Vada Pe The Nor DIL AND N DIL AND N DISSENSE C Dry G	nn th Range IATUF Carlor Rage.	Address Box 6 Is gas ex	, NMP (Give address Ave. "A" (Give address 7, Monum ctually connect	State, Federal or Feet From The M, to which approved , Lovington, to which approved ent, NM 882 sted? , When	West Lea copy of this form is NM 88260 copy of this form is 65	NM-933- County
Letter Name Pruitt "A" Location Unit Letter <u>E</u> : <u>18</u> : Line of Section <u>22</u> Tow HI. DESIGNATION OF TRANSF Name of Authorized Transporter of Cit Amoco Pipeline Company Name of Authorized Transporter of Cat Warren Petroleum Cc. If well produces all or liquide, give location of tanks.	Weil No. 1 30 Feet From mahip 95 PORTER OF C Singhead Gas (X Unit Sec. E 2	Vada Pe The Nor DIL AND N DIL AND N DIL OF C	nn th Range NATUR Rage. 34	Address Box 6 Is gas eq E Yes	, NMP (Give address Ave. "A" (Give address (7, Monum Stually connects	Sime, Federel or Feet From The M, to which approved , Lovington, to which approved ent, NM 882 ited? When 1/3	West Lea copy of this form to NM 88260 copy of this form to	NM-933-
Lesso Name Pruitt "A" Location Unit Letter <u>E</u> : <u>183</u> Line of Section <u>22</u> Tow HI. DESIGNATION OF TRANSF Name of Authorized Transporter of Cit Amoco Pipeline Company Name of Authorized Transporter of Cat Warren Petroleum Cc. If well produces off or liquide, give location of tanks. If this production is commingled with	Weil No. 1 30 Feet From mahip 95 PORTER OF ( Souther of Control of Contr	Vada Pe The Nor DIL AND N DIL AND N DIL OF PRODUCT COLLAND N DIL OF PRODUCT Twp. 22 9S y other lease	nn th Range NATUE Rage. 34 e or pa	Address Box 6 Is gas eq E Yes	, NMP (Give address Ave. "A" (Give address (7, Monum Stually connects	Sime, Federel or Feet From The M, to which approved , Lovington, to which approved ent, NM 882 ited? When 1/3	West Lea copy of this form is NM 88260 copy of this form is 65	NM-933- County
Loresto Name         Pruitt "A"         Location         Unit Letter       E         Line of Section       22         HI. DESIGNATION OF TRANSF         Name of Authorized Transporter of Cit         Amoco Pipeline Company         Name of Authorized Transporter of Cat         Warren Petroleum Cc.         If well produces all or liquids,         give location of tanks.         If this production is commingled with         NOTE:       Complete Parts IV and	Weil No. 1 30 Feet From mahip 9S PORTER OF C Singhead Gas (X Unit Sec. E 2 th that from an V on reverse su	Vada Pe The Nor DIL AND N DIL AND N DIL OF PRODUCT COLLAND N DIL OF PRODUCT Twp. 22 9S y other lease	nn th Range NATUE Rage. 34 e or pa	Address Box 6 Is gas eq E Yes	, NMP (Give address AVE. "A" (Give address 7, Monum clually connects mingling ord	Sime, Federel or Feet From The M, to which approved , Lovington, to which approved ent, NM 882 ited? When 1/3	West Lea COPY of this form is NM 88260 COPY of this form is 65 8/69	NM-933- County
Loresto Name         Pruitt "A"         Locestion         Unit Letter       E         Line of Section       22         Town         ULI. DESIGNATION OF TRANSF         Name of Authorized Transporter of Cult         Amoco Pipeline Company         Name of Authorized Transporter of Cat         Warren Petroleum Cc.         If well produces off or liquide,         give locestion of tanks.         If this production is commingled with         NOTE:       Complete Parts IV and         VI. CERTIFICATE OF COMPLIA	Weil No. 1 30 Foot From mahip 95 PORTER OF ( C or Co ainghood Gas ( Unit Soc. E 2 th that from an V on reverse sin NCE	Vada Pe The Nor The Nor DIL AND N DIL AND N Ondensate Carbon Control Twp. 22 9S y other lease ide if necess	Range ATUR Range ATUR Rage. 34 e or po sary.	Address Box 6 Is que com	, NMP (Give address AVE. "A" (Give address 7, Monum clually connects mingling ord	Signe, Federel or Feet From The M, to which approved , Lovington, to which approved ent, NM 882 ried? When 1/3 er number:	West Lea COPY of this form is NM 88260 COPY of this form is 65 8/69	NM-933- County
Loresto Name         Pruitt "A"         Locetion         Unit Letter       E         Line of Section       22         Town         ULI. DESIGNATION OF TRANSF         Name of Authorized Transporter of Cul         Amoco Pipeline Company         Name of Authorized Transporter of Cat         Warren Petroleum Cc.         If well produces oil or liquida,         give locetion of tanks.         If this production is commingled with         NOTE:       Complete Parts IV and         VI. CERTIFICATE OF COMPLIA         I hereby certify that the rules and regulati         been complied with and that the information	Weil No. 1 30 Feet Free mahip 95 PORTER OF ( C or Ce aungheed Gas (X Unit Sec. E 2 th that from an V on reverse su NCE ions of the Oil Co	Vada Pe The Nor The Nor DIL AND N DIL AND N Ondensate C Pry G Twp. 22 9S y other lease ide if necess	Range ATUR Range Range Range 34 e or pa sary.	Address Address Address Box 6 Is gas ed F Yes ol. give com	, NMP (Give address Ave. "A" (Give address 7, Monum ctually connects mingling ord OIL (	Sime, Federal or Feet From The M, i co which approved , Lovington, i co which approved ent, NM 882 minumber: CONSERVATIO	West Lea copy of this form is NM 88260 copy of this form is 65 3/69	NM-933- County to be sent) to be sent)
Loresto Name         Pruitt "A"         Locestion         Unit Letter       E         Line of Section       22         Tow         ULI. DESIGNATION OF TRANSH         Name of Authorized Transporter of Cuit         Amoco Pipeline Company         Name of Authorized Transporter of Cuit         Amoco Pipeline Company         Name of Authorized Transporter of Car         Warren Petroleum Cc.         If well produces oil or liquide,         give locestion of tanks.         If this production is commingled with         NOTE:       Complete Parts IV and         VI. CERTIFICATE OF COMPLIA         Lorestife that the suice and resulation	Weil No. 1 30 Feet Free mahip 95 PORTER OF ( C or Ce aungheed Gas (X Unit Sec. E 2 th that from an V on reverse su NCE ions of the Oil Co	Vada Pe The Nor The Nor DIL AND N DIL AND N Ondensate C Pry G Twp. 22 9S y other lease ide if necess	Range ATUR Range Range Range 34 e or pa sary.	Address Address 302 E. Address Box 6 Is gas ed Yes ol. give com	, NMP (Give address Ave. "A" (Give address 7, Monum crually connects mingling ord OIL ( OVED	Signe, Federal or Feet From The M, to which approved , Lovington, to which approved ent, NM 882 sid 7 When 1/3 er number: CONSERVATIO M, PRIGINAL SIGNEE	West Lea copy of this form is NM 88260 copy of this form is 65 3/69	NM-933- County to be sent) to be sent)
Loresto Name         Pruitt "A"         Locetion         Unit Letter       E         Line of Section       22         Town         ULI. DESIGNATION OF TRANSF         Name of Authorized Transporter of Cul         Amoco Pipeline Company         Name of Authorized Transporter of Cat         Warren Petroleum Cc.         If well produces oil or liquida,         give locetion of tanks.         If this production is commingled with         NOTE:       Complete Parts IV and         VI. CERTIFICATE OF COMPLIA         I hereby certify that the rules and regulati         been complied with and that the information	Weil No. 1 30 Feet Free mahip 95 PORTER OF ( C or Ce aungheed Gas (X Unit Sec. E 2 th that from an V on reverse su NCE ions of the Oil Co	Vada Pe The Nor The Nor DIL AND N DIL AND N Ondensate C Pry G Twp. 22 9S y other lease ide if necess	Range ATUR Range Range Range 34 e or pa sary.	Address 34E Address 302 E. Address Box 6 1s qas ex Yes ol. give com	, NMP (Give address Ave. "A" (Give address 7, Monum crually connect S mingling ord OIL ( CVED C	Sime, Federel or Feet From The M, to which approved to which approved ent, NM 882 red? When 1/3 er number: CONSERVATIO M, PRIGINAL SIGNER DISTRICT I	West Lea copy of this form is NM 88260 copy of this form is 65 3/69 N DIVISION DIVISION DBY JERRY SEX SUPERVISOR	NM-933- County to be sent; to be sent; to be sent;
Lesso Name Pruitt "A" Location Unit Letter <u>E</u> : <u>18</u> : Line of Section <u>22</u> Tow HI. DESIGNATION OF TRANSF Name of Authorized Transporter of Cit Amoco Pipeline Company Name of Authorized Transporter of Cat Warren Petroleum Cc. If well produces all or liquide, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and I VI. CERTIFICATE OF COMPLIA I hereby certify that the rules and regulation been complied with and that the information my knowledge and belief.	Weil No. 1 30 Feet From mahip 9S PORTER OF C Singhead Gas S Unit Sec. E 2 th that from an V on reverse su NCE ions of the Oil Co on given is true an	Vada Pe The Nor The Nor DIL AND N DIL AND N Ondensate C Pry G Twp. 22 9S y other lease ide if necess	Range ATUR Range ATUR Rage. 34 e or po sary.	Address 34E Address 302 E. Address Box 6 1s qas ex E Yes ol. give com TITLI TITLI	, NMP (Give address Ave. "A" (Give address 7, Monum citually connects DIL ( OVED 0 E this form is to this is a re-	Signe, Federal or Feet From The M, to which approved , Lovington, to which approved ent, NM 882 and 7 When 1/3 er number: CONSERVATIO M, PRIGHAL SIGNEE DISTRICT I to be filed in com quest for allowable	West Lea Copy of this form is NM 88260 Copy of this form is 65 3/69 N DIVISION D BY JERRY SEX SUPERVISOR supliance with Rul is for a newly dri d by a tabulation	NM-933- County 50 be sent) 50 be sent) 5
Loresto Name         Pruitt "A"         Locetion         Unit Letter       E         Line of Section       22         Town         ULI. DESIGNATION OF TRANSF         Name of Authorized Transporter of Cul         Amoco Pipeline Company         Name of Authorized Transporter of Cat         Warren Petroleum Cc.         If well produces oil or liquida,         give locetion of tanks.         If this production is commingled with         NOTE:       Complete Parts IV and         VI. CERTIFICATE OF COMPLIA         I hereby certify that the rules and regulati         been complied with and that the information	Weil No. 1 30 Feet From mahip 9S PORTER OF C Singhead Gas S Unit Sec. E 2 th that from an V os reverse su NCE ions of the Oil Co on given is true ar	Vada Pe The Nor The Nor DIL AND N DIL AND N Ondensate C Pry G Twp. 22 9S y other lease ide if necess	Range ATUR Range ATUR Rage. 34 e or po sary.	Address Address 302 E. Address Box 6 Is gas ed Yes ol. give com TITLI TITLI Well, f tests	, NMP (Give address Ave. "A" (Give address 7, Monum citually connects mingling ord OIL ( OVED C E his form is to this is a re- this form mutaken on the	Signe, Federal or Feet From The M, to which approved , Lovington, to which approved ent, NM 882 and 7 When 1/3 er number: CONSERVATIO M, STRICT I DISTRICT I to be filled in com quest for allowable t well in accordant	West Lea Copy of this form is NM 88260 Copy of this form is 65 3/69 N DIVISION D BY JERRY SEX SUPERVISOR supliance with RUL is for a newly dri d by a tabulation isco with RUL 5 1	NM-933- County 50 be sent) 50 be sent) 5
Lesse Name Pruitt "A" Location Unit Letter <u>E</u> : <u>18</u> : Line of Section <u>22</u> Tow HI. DESIGNATION OF TRANSF Name of Authorized Transporter of Cit Amoco Pipeline Company Name of Authorized Transporter of Cat Warren Petroleum Cc. If well produces all or liquide, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and I VI. CERTIFICATE OF COMPLIA I hereby certify that the rules and regulation been complied with and that the information my knowledge and belief.	Weil No. 1 30 Feet From makip 9S PORTER OF C Some of Case S Unit Sec. E 2 th that from an V on reverse su NCE ions of the Oil Ca on given is true and Mure J gen t	Vada Pe The Nor The Nor DIL AND N DIL AND N Ondensate Carbon Conservation Divised complete to	Range ATUR Range ATUR Rage. 34 e or po sary.	Address 34E Address 302 E. Address Box 6 1s qas ex E Yes ol. give com TITLI TITLI TITLI able o	, NMP (Give address Ave. "A" (Give address 7, Monum citually connect DiL ( OVED OIL ( OVED this form is the this form mutaken on the it sections to a new and r	Signe, Federal or Feet From The M, to which approved , Lovington, to which approved ent, NM 882 and 7 When 1/3 er number: CONSERVATIO M, PRIGHAL SIGNEE DISTRICT I to be filed in com quest for allowable	West Lea copy of this form is NM 88260 copy of this form is 65 3/69 N DIVISION D BY JERRY SEX SUPERVISOR supliance with RUL is for a newly dri d by a tabulation the with RUL I is se filled out comp	NM-933- County so be sent; to

•

. . . . . . . .

-- .-

Form C-104 Revised 10-01-78 Format 08-01-83 Page 2

## IV. COMPLETION DATA

Designate Type of Completion	on – (X)	OII Well	Gas Well	New Well	Workover	Deepen I	Plug Back	Same Restv.	Diff. Res'v.
Data Sputded	Date Comp	al. Ready to F	2104.	Total Dept	h		P.B.T.D.	4	i
Elevetions (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oll/Ges Pay			Tubing Depth		
Perforationa	<u></u>			- <b>I</b>			Depth Casin	ng Shoe	
		TUBING,	CASING, AN	DCEMENTI	NG RECOR	 D			
HOLE SIZE	CASI	ING & TUBI	NG SIZE		DEPTH SE	T	S/	CKS CEMEN	17
	+								
				+					<u> </u>
				1					

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of solal volume of load oil and must be equal to or exceed top allow-OIL WELL coll for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Teet	Producing Method (Flow, pump, gas lift, etc.)		
Length of Tool	Tubing Pressure	Cdeing Preseure	Choke Size	
Actual Prod. During Test	Oll - Bhis.	Water - Bbis.	Gas + MCF	

## GAS WELL

Actual Pros. Test - MCF/D	Longth of Test	Bbis. Condensate/ADACF	Gravity of Condensate
Testing Method (publ, back pr.)	Tubing Processo (Shat-in )	Casing Pressure (Shut-1.8)	Chake Size

