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| FILE | | |
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| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE DEVIATIONS OFFICE O.C.C.
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

| | |
|--|---|
| Operator Charles B. Read | |
| Address P. O. Box 2126, Roswell, New Mexico 88201 | |
| Reason(s) for filing (Check proper box) | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| Other (Please explain) | |

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|---------------------|
| Lease Name Shell-State | Well No. 3 | Pool Name, including Formation North Bagley-Lower Pennsylvanian (undesignate) R-3988 | Kind of Lease State, Federal or Fee | Lease No. K-3836 |
| Location Unit Letter C ; 660 Feet From The North Line and 2097 Feet From The West | | | | |
| Line of Section 18 Township 11S Range 33E , NMPM, Lea 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"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Service Pipeline Company | 3411 Knoxville Ave., Lubbock, Texas | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Warren Pet. Corp. | P. O. Box 1589, Tulsa, Oklahoma | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit A | Sec. 18 | Twp. 11S | Rge. 33E | Is gas actually connected? Yes | 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 | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Rest'v. | Diff. Rest'v. |
| Date Spudded 2-14-69 | Date Compl. Ready to Prod. 4-24-69 | Total Depth 10,410' | P.B.T.D. 10,384' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 4316.3 GL | Name of Producing Formation Strawn | Top Oil/Gas Pay 10,137' | Tubing Depth 10,120' | | | | | |
| Perforations 2J S/F @ 10,137, 10,140, 10,145, 10,182, 10,184, 10,186, 10,249, 10,251, 10,256, & 10,258 | Depth Casing Shoe 10,410' RKB | | | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 15" | 12 3/4" | | 381 RKB | | 350 sx. | | | |
| 11" | 8 5/8" | | 3756 RKB | | 350 sx. | | | |
| 7 7/8" | 5 1/2" | | 10,410 RKB | | 500 sx. | | | |

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)

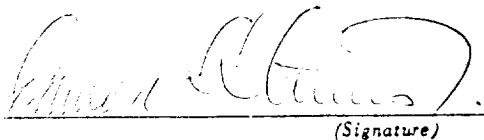
| | | | |
|--|-------------------------|--|-----------------------|
| Date First New Oil Run To Tanks 4-23-69 | Date of Test 4-23-69 | Producing Method (Flow, pump, gas lift, etc.) Swabing | |
| Length of Test 24 Hrs. | Tubing Pressure 0 | Casing Pressure Pkr | Choke Size Open 2" |
| Actual Prod. During Test 430 | Oil-Bbls. 110 | Water-Bbls. 320 | Gas-MCF TSTM |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

VI. 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.


(Signature)

Agent

(Title)

April 24, 1969

OIL CONSERVATION COMMISSION

APPROVED

BY

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,