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FILE

U.S.G.S.

LAND OFFICE

TRANSPORTER

OIL

GAS

OPERATOR

PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

Operator

Apache Exploration Corporation

Address

P. O. Box 2299, Tulsa, Oklahoma 74101

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Dry Gas

Casinghead Gas

Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name

Willis

Well No.

2

Pool Name, including Formation

Vada Penn (Bough "C")

Kind of Lease

State, Federal or Fee

Fee

Lease No.

---

Location

Unit Letter

I

Feet From The

660

East

Line and

1980

Feet From The

South

Line of Section

4

Township

SS

Range

34E

NMPM,

Lea

County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Effective 7 A.M. April 12, 1973

Name of Authorized Transporter of Oil

Pennian Corporation

Address (Give address to which approved copy of this form is to be sent)

P. O. Box 1183, Houston, Texas 77001

Name of Authorized Transporter of Casinghead Gas

Warren Petroleum Company

Address (Give address to which approved copy of this form is to be sent)

P. O. Box 1589, Tulsa, Oklahoma 74101

If well produces oil or liquids, give location of tanks.

Unit

H

Sec.

4

Twp.

SS

Rge.

34E

Is gas actually connected?

Yes

When

5/71

If this production is commingled with that from any other lease or pool, give commingling order number:

Not Applicable

V. COMPLETION DATA

Designate Type of Completion -- (X)

Date Spudded

Date Compl. Ready to Prod.

Total Depth

P.B.T.D.

Elevations (DF, RKB, RT, GR, etc.)

Name of Producing Formation

Top Oil/Gas Pay

Tubing Depth

Perforations

Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

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

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

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.

Tom R. Jerome

Tom R. Jerome

Regional Production Administrator

April 12, 1973

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, 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.