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| | GAS |
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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 Stallworth Oil & Gas | | |
| Address 407 West Missouri Avenue, Midland, Texas 79701 | | |
| Reason(s) for filing (Check proper box) | Other (Please explain) | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: | CASINGHEAD GAS MUST NOT BE PLACED AFTER 2/13/74 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED. |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | |
| Change in Ownership <input checked="" type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |

If change of ownership give name and address of previous owner **Hanson Oil Corporation**

THIS WELL HAS BEEN PLACED IN THE POOL DESCRIBED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------------|--|---|---------------------------|
| Lease Name Midwest-State | Well No. 1 | Pool Name, Including Formation Vada (Penn.) R-4734 | Kind of Lease State, Federal or Fee State | Lease No. L-494 |
| Location Unit Letter N ; 990 Feet From The South Line and 1650 Feet From The West Line of Section 2 Township 9-S Range 33-E , 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"/> Mobil Oil Corporation - Trucks | Address (Give address to which approved copy of this form is to be sent) Box 900, Dallas, Texas 75221 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, Okla. 74102 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit N | Sec. 2 | Twp. 9-S | Rge. 33-E | Is gas actually connected? 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 | New Well <input checked="" type="checkbox"/> | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded 8-6-73 | Date Compl. Ready to Prod. 12-11-73 | | Total Depth 9610 | | P.B.T.D. 9578 | | | |
| Elevations (DF, RKB, RT, GR, etc.) KB 4359, GL 4347 | Name of Producing Formation Bough "C" | | Top Oil/Gas Pay 9525 | | Tubing Depth 9485 | | | |
| Perforations 9532-9558 | | | | | Depth Casing Shoe 9610 | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17-1/2" | 13-3/8" | | 410' | | 400 sx - circulated | | | |
| 12-1/4" | 9-5/8" | | 3887' | | 400 sx | | | |
| 8-3/4" | 7" | | 9610' | | 370 sx | | | |
| | 2-7/8" | | 9485' | | | | | |

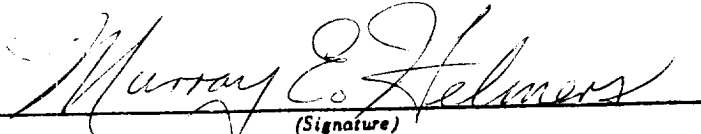
V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

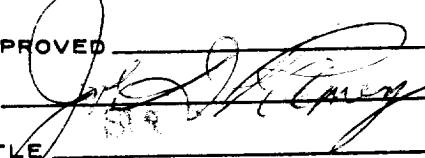
| | | | |
|--|---------------------------------|---|---------------------------|
| Date First New Oil Run To Tanks 12-13-73 | Date of Test 12-14-73 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 hrs. | Tubing Pressure 750# | Casing Pressure 1200# | Choke Size None |
| Actual Prod. During Test | Oil-Bbls. 430 | Water-Bbls. 560 | Gas-MCF 473 |

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| 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)
Production Manager
(Title)
December 14, 1973
(Date)

OIL CONSERVATION COMMISSION
APPROVED _____, 19____
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