

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
|------------------------|-----|
| CO. BY OFFICE RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.G.B. | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

Operator
Brazos Petroleum CompanyAddress
708 Petroleum Bldg. - Midland, Texas 79701

Reason(s) for filing (Check proper box)

| | | | |
|---------------------|-------------------------------------|---------------------------|--------------------------|
| New Well | <input checked="" type="checkbox"/> | Change in Transporter of: | |
| Recompletion | <input type="checkbox"/> | Oil | <input type="checkbox"/> |
| Change in Ownership | <input type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> |
| | | Dry Gas | <input type="checkbox"/> |
| | | Condensate | <input type="checkbox"/> |

Other (Please explain)

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

| | | | | |
|-------------------|----------|--------------------------------|-------------------------------|--------------------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| Ferderber Federal | 1 | Sawyer (San Andres) | State, Federal or Fee Federal | 28064 |
| Location | | | | |
| Unit Letter | N | : 660 Feet From The | South Line and | 1980 Feet From The |
| Line of Section | 7 | Township | 9 S | Range 38-E |
| | | | | NMPM, Lea |
| | | | | County |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | |
|--|--|------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| The Permian Corporation Permian (Eff. 9/1/87) | P.O. Box 1183 - Houston, Texas 77001 | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | |
| Warren Petroleum | P.O. Box 1589 - Tulsa, Oklahoma 74102 | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. |
| | N | 7 |
| | 9 S | 38-E |
| | | No |

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

COMPLETION DATA

| | | | | | | | | |
|---|-----------------------------|-----------------|--------------|----------|--------|-----------|-------------|------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res' |
| | | X | | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | | | |
| 5-29-81 | 6-27-81 | 5060' | 5041' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | | | | | |
| 3972.3 GR | San Andres | 4946' | 4835' | | | | | |
| Perforations | Depth Casing Shoe | | | | | | | |
| 4946'-4954', 4932'-4938', 4914'-4926', 4986'-4942', 4858'-4876' | 5060' | | | | | | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 12 1/4" | 8 5/8" 24# Casing | 433' | 250 |
| 7 7/8" | 4 1/2" 10.5# Casing | 5060' | 700 |
| | | | |
| | | | |

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 all
able 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/MCF | Gravity of Condensate |
| 324 | 24 Hrs. | 5 | 28.4 60° |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shot-In) | Casing Pressure (Shot-In) | Choke Size |
| | 30 PSI | 150 | 32.64" |

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.

OIL CONSERVATION DIVISION

APPROVED NOV 1981, 19BY Oil ConservationTITLE Oil Conservation

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

If this is a request for allowable for a newly drilled or deeper
well, this form must be accompanied by a tabulation of the deviat
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for all
able on new and recompleted wells.Fill out only Sections I, II, III, and VI for changes of own
well name or number, or transporter, or other such change of conditSeparate Forms C-104 must be filed for each pool in mult
compleated wells.

Production Clerk

July 1, 1981

(Date)