

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Supersedes Old C-104 and C-110  
Effective 1-1-85

|                  |     |
|------------------|-----|
| DISTRIBUTION     |     |
| ANTA FE          |     |
| FILE             |     |
| U.S.G.S.         |     |
| LAND OFFICE      |     |
| TRANSPORTER      | OIL |
|                  | GAS |
| OPERATOR         |     |
| PRORATION OFFICE |     |

|                                                         |                                                                             |
|---------------------------------------------------------|-----------------------------------------------------------------------------|
| Operator<br>JOE E. BROWN                                |                                                                             |
| Address<br>BOX 543 LOVINGTON, NEW MEXICO 88260          |                                                                             |
| Reason(s) for filing (Check proper box)                 |                                                                             |
| New Well <input type="checkbox"/>                       | Change in Transporter of:                                                   |
| Recompletion <input type="checkbox"/>                   | Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>    |
| Change in Ownership <input checked="" 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 APOLLO OIL COMPANY BOX 1737 HOBBS, NEW MEXICO 88240

II. DESCRIPTION OF WELL AND LEASE

|                               |                                                                     |                                                |                       |
|-------------------------------|---------------------------------------------------------------------|------------------------------------------------|-----------------------|
| Lease Name<br>FARRELL FEDERAL | Well No. Pool Name, including Formation<br>10 CHAVEROO - SAN ANDRES | Kind of Lease<br>State, Federal or Fee FEDERAL | Lease No.<br>108997-A |
| Location                      |                                                                     |                                                |                       |
| Unit Letter F                 | 1980                                                                | Feet From The N                                | Line and 1980         |
| Line of Section 28            |                                                                     | Township 7-S                                   | Range 33-E            |
| NMPM, ROOSEVELT               |                                                                     |                                                |                       |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                                             |                                                                                                               |         |          |           |                                |      |
|---------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------|---------|----------|-----------|--------------------------------|------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br>NAVAJO REFINING COMPANY | Address (Give address to which approved copy of this form is to be sent)<br>BOX 175 ARTESIA, NEW MEXICO 88210 |         |          |           |                                |      |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/><br>CITIES SERVICE COMPANY     | Address (Give address to which approved copy of this form is to be sent)<br>BOX 300 TULSA, OKLAHOMA 74102     |         |          |           |                                |      |
| If well produces oil or liquids, give location of tanks.                                                                                    | Unit J                                                                                                        | Sec. 28 | Twp. 7-S | Rge. 33-E | 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                    | Gas Well             | New Well        | Workover  | Deepen | Plug Back         | Same Res'v. | Diff. Res'v. |
| Date Spudded                         | Date Compl. Ready to Prod.  |                      | Total Depth     |           |        | P.B.T.D.          |             |              |
| Elevations (DF, RKB, RT, CR, etc.)   | Name of Producing Formation |                      | Top Oil/Gas Pay |           |        | Tubing Depth      |             |              |
| Perforations                         |                             |                      |                 |           |        | Depth Casing Shoe |             |              |
| FLUING, CASING, AND CEMENTING RECORD |                             |                      |                 |           |        |                   |             |              |
| HOLE SIZE                            |                             | CASING & TUBING SIZE |                 | DEPTH SET |        | SACKS CEMENT      |             |              |
|                                      |                             |                      |                 |           |        |                   |             |              |
|                                      |                             |                      |                 |           |        |                   |             |              |
|                                      |                             |                      |                 |           |        |                   |             |              |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

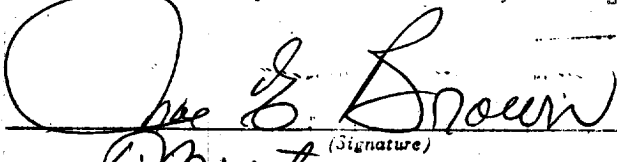
|                                 |                 |                                               |            |
|---------------------------------|-----------------|-----------------------------------------------|------------|
| Date First New Oil Run To Tanks | Date of Test    | Producing Method (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 the information given above is true and complete to the best of my knowledge and belief.

  
(Signature)  
Operator  
(Title)  
2-5-81  
(Date)

OIL CONSERVATION COMMISSION

FEB 9 1981  
APPROVED  
By Orly Signed By  
Jerry Sexton  
TITLE Dist. & Supv.

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 multiple