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U.S.G.S.			
LAND OFFICE			
IRANSPORTER	OIL		
	GAS		
OPERATOR			
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Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Kavenen Real Estate Trust e/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexico 88240
Reason(s) for filing (Check proper box)
Other (Please explain) New Well Effective June 1, 1971 Recompletion Oil Dry Gas Change in Ownership Casinahead Gas Condensate If change of ownership give name and address of previous owner Konitor Petroleum Corporation, Box 763, Hobbs, New Mexico 88240 II. DESCRIPTION OF WELL AND LEASE Veil No. Pool Name, Including Formation Kind of Lease Lease No. **₹**3995 Chaveroo-San Andres Anderson State ; 660 | Feet From The 8011th | Line and 1980 Unit Letter 0 Feet From The Line of Section 36 Township 7.8 Range 32 E , NMPM, Roosevelt III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Oil | or Condensate | or Condensate | Address (Give address to which approved copy of this form is to be sent) Box 900, Dellas, Texas.
Address (Give address to which approved copy of this form is to be sent) Mobil Pina Line Company
Name of Authorized Transporter of Casinghead Gas () or Dry Gas Bartlesville, Oklahoma Cities Service Oil Company If well produces oil or liquids, 11/18/67 G 36 75 32E Tes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Gas Well New Well Workover Flug Back | Same Res'v. Diff. Res'v. Deepen Oil Well Designate Type of Completion - (X) Date Compl. Ready to Prod. P.B.T.D. Total Depth Tubing Depth Elevations (DF, RKB, RT, GR, etc., Top Oil/Gas Pay Name of Producing Formation Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE HOLE SIZE (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL
Date First New Oil Run To Tanks Producing Method (Flow, pump, gas lift, erc.) Date of Test Choke Size Casina Pressure Length of Test Tubing Pressure Water - Bbls. GOT - MCF Oil-Bhis. Actual Prod. During Test **GAS WELL** Bbls. Condensate/MMCF Gravity of Condensate Actual Prod. Test-MCF/D Length of Test Casing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE 1UN 23-1971 APPROV 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. BY TITILE \_ SUPERVISOR EXISTRICT 1 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.

6/18/71<sub>(Date)</sub>

All sections of this form must be filled out completely for allow-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

SUPERVISOR DISTRICT I

RECEIVED

JUN 221971
OIL CONSERNATION COMM.
HOBBS, N. M.