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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL GAS
OPERATOR	
PRODUCTION 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-11
Effective 1-1-65

Operator MURPHY OPERATING CORPORATION	
Address 200 West First Street-Fourth Floor, Roswell, New Mexico 88201 (P.O. Box 2648)	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Ownership <input checked="" type="checkbox"/>	Other (Please explain) CHANGE OF WELL NAME & NUMBER (Well previously: Roosevelt 'AN' State #1) Changes effective July 1, 1983

If change of ownership give name and address of previous owner **Gulf Oil Exploration & Production Co., P.O. Box 1150, Midland, TX 79702**

1. DESCRIPTION OF WELL AND LEASE				
Lease Name Section #32	Well No. 2	Pool Name, including Formation Todd Lower San Andres	Kind of Lease State, Federal or Fee State	Lease No. K-6285
Location Unit Letter B ; 660 Feet From The North Line and 1980 Feet From The East Line of Section 32 Township 7S Range 36E , NMPM, Roosevelt County				

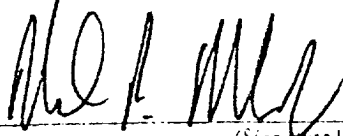
2. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Mobile Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 900, Dallas, Texas 75221
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service O&G Corp.	Address (Give address to which approved copy of this form is to be sent) Bluitt Plant, Milnesand, New Mexico 88215
If well produces oil or liquids, give location of tanks. Unit G Sec. 32 Twp. 7S Rge. 36E	Is gas actually connected? Yes When 6/4/69

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

3. COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
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		
TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

4. 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 (flow, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

5. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION COMMISSION	
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.		APPROVED AUG 4 1983 , 19	
 (Signature) Mark B. Murphy Vice-President, Murphy Operating Corporation (Title)		BY ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT I SUPERVISOR	
(Date) 8/1/83		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 re-completed wells. Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of condition.	