Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

## OIL CONSERVATION DIVISION

DISTRICT II

P. O. Box 1088

P.O. Drawer DD, Artesia, NM 88210 DISTRICT III

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.		TO 1	RA	NSPO	RT O	IL AN	ID NATU	RAL GA	:A I \S	ION								
Operator MAERSK ENERGY Inc.											ell API No.							
Address 2424 Wilcrest, Suite 200, Hous	ton, Te	xas 77042	-2753							<del></del>	30-041-206	50						
Reason(s) for Filing (Check prope New Well	r box)		in Tr	ansport of:		·	☑ Other (P.	lease explain	1)			·						
Change in Operator (X)  If change of operator give name		nghead Gas		Co	Ory Gas ndensat	te 🗌												
and address of previous operator II. DESCRIPTION OF WEL	L AN	DI LEAS	Compa E	ny, P.O.	Box 5	1311, N	<u> Iidland, Texas</u>	79710	<del></del> -									
323 M				ame, In Milne	, Including Formation Kind of state, Fe			f Lea Feder	Lease FEDERAL Lease No. deral or Fee LC 062178									
Location Unit Letter A Section 13 Township III. DESIGNATION OF TRA	: <u>126</u> 8S NSPC	Feet	From ' Rang OF O	The <u>Nor</u> e 341	th L	ine and NMP	1300 Feet Fro		East		Line oosevelt	LC 062178						
Name of Authorized Transporter of Charles Marketing & Transported on Name of Authorized Transport of C	Oil X	or Conde	ensate	oden	يث.	Ac 16	dress (Give ad	, 1100000	- 11	11002								
Name of Authorized Transport of Casinghead Gas ☑ or Dry Gas ☐ Warren Petroleum Company  If well produces oil or liquids, Unit Sec. Transport					T		Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, Oklahoma 74102											
give location of tanks.  Unit Sec. Twp. 13 8S  this production is commingled with that from any other leases or pool, give. COMPLETION DATA					Rge 341 give co	E Is possible in the control of the	Is gas actually connected? YES When? 6-18-82 mingling order number:					82						
Designate Type of Completion - (X)		0.1.77.11				Well	Workover	Deepen	Pl	ig Back								
Date Spudded	Date Compl. Ready to Prod.				<u> </u>	Total	Total Depth				ug Back   Same Res'v   Diff   P.B.T.D.							
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay				Tubing Depth								
Perforations										Depth Casing Shoe								
HOLE SIZE CASING A						ND CEMENTING RECORD												
	HOLE SIZE CASING & TURING SIZE					DEPTH SET				SACKS CEMENT								
						<del></del>			$\dashv$									
. TEST DATA AND REQUE DIL WELL (Test must be after reco	ST FO	OR ALLO	OWA	BLE														
Date of Test					1 must l	Producing Method												
Length of Test	Tubing Pressure					Casing Pressure				Choke Size								
ctual Prod. During Test  S WELL  Oil - BBLS						Water - BBLS				Gas - MCF								
Actual Prod. Test - MCF/D	Length of Test					Bbls.Condensate/MMCF				Gravity of Condensate								
Testing Method (pilot, back pr.)	B - research (Olitat-III)					Casing Pressure (Shut-In)				Choke Size								
OPEDATOR OFFICE												OIL CONSERVATION DIVISION						
OPERATOR CERTIFICATE  I hereby certify that the rules and representation have been complied with and is true and complete to the best of my	gulation	s of the Oi	l Cons				OIL C	ONSER	VA	TION	DIVISIOI	V						
I hereby certify that the rules and report Division have been complied with and is true and complete to the best of my Down Division Division Division Hereby Division Hereby Division Hereby Division Hereby Division Hereby Division Hereby Certify Division Hereby Certify Hereby Certify Division Hereby Certify Hereby Certi	gulation	s of the Oi	l Cons			Date	OIL C			TION I		V						
I hereby certify that the rules and rep Division have been complied with and is true and complete to the best of my	gulation I that the knowled	s of the Oi e informati edge and be	l Consion give	servation ven above	<u>s</u>		Approved	i	<u>M</u>	AR 23	1993	V						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter or other such changes.
   Separate Form C-104 must be filed for each pool in multiply completed wells.