

| FILE THE ORIGINAL AND 4 COPIES WITH THE APPROPRIATE OFFICE | | | | | |
|--|--------------|------------------|--|--|---------------|
| Company or Operator ANADARKO PRODUCTION COMPANY | | | Lease North Caprock Queen Unit 11, Tr. 2 | | Well No. 1 |
| Unit Letter B | Section 1 | Township 13 | Range 31 | County Chaves | |
| Pool Caprock Queen | | | | Kind of Lease (State, Fed, Fee) State | |
| If well produces oil or condensate give location of tanks | | Unit Letter B | Section 1 | Township 13 | Range 31 |
| Authorized transporter of oil <input type="checkbox"/> or condensate <input type="checkbox"/> None | | | Address (give address to which approved copy of this form is to be sent) | | |
| Is Gas Actually Connected? Yes _____ No <u>X</u> | | | | | |
| Authorized transporter of casing head gas <input type="checkbox"/> or dry gas <input type="checkbox"/> None | | Date Connected | Address (give address to which approved copy of this form is to be sent) | | |
| If gas is not being sold, give reasons and also explain its present disposition: | | | | | |
| REASON(S) FOR FILING (please check proper box) | | | | | |
| New Well <input type="checkbox"/> | | | Change in Ownership <input checked="" type="checkbox"/> | | |
| Change in Transporter (check one) | | | Other (explain below) | | |
| Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> | | | | | |
| Casing head gas . <input type="checkbox"/> Condensate... <input type="checkbox"/> | | | | | |
| Remarks PURCHASED BY ANADARKO; OPERATIONS ASSUMED EFFECTIVE AUGUST , 1965. Injection Well. Wells formerly owned and operated by Ambassador Oil Corporation. | | | | | |
| The undersigned certifies that the Rules and Regulations of the Oil Conservation Commission have been complied with. | | | | | |
| Executed this the 2ND day of | | | AUGUST | | |
| OIL CONSERVATION COMMISSION | | | By | | |
| Approved by | | | Title | | |
| | | | PROD. RECORDS SUPVR. | | |
| Title | | | Company | | |
| | | | ANADARKO PRODUCTION COMPANY | | |
| Date | | | Address | | |
| | | | P. O. Box-9338 7317 FORT WORTH, TEXAS 76107 | | |