NEW MEXICE OIL CONSERVATION COMMISSION Form C-104 SANTA FE REQUEST FOR ALLOWABI Supersedes Old C-104 and C-110 FILE AND U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS AND OFFICE OIL TRANSPORTER GAS OPERATOR PRORATION OFFICE Operator Chaves Oil Ltd. Address c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexico 88240 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Effective May 1, 1972 Recompletion Dry Gas OH Change in Ownership 3 Casinghead Gas Condensate If change of ownership give name cities Service Oil Co., Hobbs, New Mexico and address of previous owner ______ Cities Service Oil Co., Hobbs, New Mexico II. DESCRIPTION OF WELL AND LEASE | Well No. | Pool Name, Including Formation LC-070336 Kind of Lease Lease No. Caprock Queen State, Federal or Fee Federal Sand Unit Tract above Location D 330 Feet From The 330 North ine and ___ West Unit Letter __ Feet From The 14 S 31 E Line of Section Township Chaves NMPM. Range County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | Name of Authorized Transporter of Oil | or Condensate | | Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Sec. Twp. Unit P.ge. Is gas actually connected? When If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v, Diff. Res'v Designate Type of Completion - (X) Date Spudded Total Depth Date Compl. Ready to Prod. Elevations (DF, RKB, RT, GR, 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 SACKS CEMENT (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 Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure Casing Pressure Choke Size Actual Prod. During Test Oil-Bbis. Water - Bble. 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 OIL CONSERVATION COMMISSION MAY 4 1972 VI. CERTIFICATE OF COMPLIANCE MAY APPROVED . 19 I hereby certify that the rules and regulations of the Oil Conservation Orig. Signed by Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Joe D. Ramey BY_ Dist. I, Supv.

TITLE .

Venua Lalles

(Signature) Agent

(Title) May 3, 1972

(Date)

Alexander Color

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.

Fifl out only Sections I, II. III, and VI for changes of owner, il name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed mails

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MAY 3 1972

OIL CONSERVATION COMM. HOBBS, N. M.