

REQUEST FOR ALLOWANCE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

How to fill:
See reverse side of form
Effective 1-1-65

Gene A. Snow

606 S. 13th Lovington, N.M. 88260

Kind of (1) fuel (2) rock (proper box)

Now Well ☐ Change in Test (proper oil)
Now Production ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☒ Gashead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

Weldon Guest & I. J. Wolfson 800 Hamilton Bldg.
Wichita Falls, TX 76301

W. DESIGNATION OF WELL AND LEASE

DQSU	Tract 10	2	Caprock Queen	State, Federal or Fee	LC070337
Location					
Unit Letter	K	Feet From The	Line and	Feet From The	
Section	10	Township	14 S	Range	31 E
County				Chaves	State

H. TRANSPORT OF TRANSPORTED OIL AND NATURAL GAS

Name of Association Transported Oil ☒ or Condensate ☐	Address (Give address to a State approved copy of this form to be sent)				
Texas New Mexico Pipe Line Co.	Box 1510 Midland, TX				
Name of Association Transported Gashead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)				
How it produces oil or liquid, give location of tanks.	Unit	Sec.	Twp.	Range	Is gas actually extracted? When
	A	16	14 S	31 E	no

If this production is commingled with that from any other lease or pool, give commingling order number: 14-08-001-6399

I. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	Now Well	Wellbore	Is open	Plug back	Recompletion	Is, or will be
Date drilled	Date Compl. ready to flow	Test Depth	F.T.D.					
Drillers (DF, NRB, RT, CR, etc.)	Name of Production Formation	Top of CHANTRY	Testing Depth					
Perforations				Depth Casing Shoe				
TUBING AND CEMENT DATA								
PIPE SIZE	CASING & TUBING SIZE	PIPE JOINT SET	BLOCKS PER JOINT					

J. TEST DATA AND REQUEST FOR ALLOWANCE

(Test must be a separate copy of the results of test and must be signed by or under supervision of a qualified person)

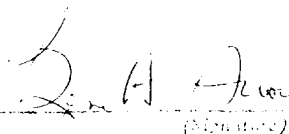
Length of Test	Unit of Test	Name of Test (e.g., Flow, Pump, etc.)	
Length of Test	Testing Pressure	Testing Pressure	Flow Rate
Amount Flow During Test	Oil-BBLs	Water-BBLs	Gas-MCF

K. CASING

Amount Flow Test-MCF/D	Length of Test	Oil-BBLs/MCF	Quantity of Cement
Testing Pressure (psi, test psi)	Testing Pressure (psi, test)	Testing Pressure (psi, test)	Cement Size

L. OPERATOR'S STATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the facts herein given above are true and complete to the best of my knowledge and belief.

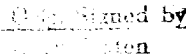

(Signature)

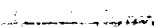
Operator

11-1-75

OIL CONSERVATION COMMISSION

APPROVED

BY  Signed by

TITLE 

This form is to be filed in accordance with rules of the

Oil Conservation Commission for oil and gas production and must be signed by a qualified person

and must be filed in accordance with rules of the Oil Conservation Commission

and must be filed in accordance with rules of the Oil Conservation Commission