

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

SEE INSTRUCTIONS
at Bottom of Page

DISTRICT III
1000 Rio Diazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Petroleum Development Corporation
Address 9720 B Candelaria, NE Albuquerque, NM 87112
Well API No. 30-005-20717
Reason(s) for Filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☒ Dry Gas ☐
Change in Operator ☐ Casinghead Gas ☐ Condensate ☒
If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Strange Federal Well No. 1 Pool Name, Including Formation Tomahawk, San Andres Kind of Lease Federal Lease No. NM15677A
Location
Unit Letter P : 660 Feet From The South Line and 660 Feet From The East
Section 25 Township 7S Range 31W, NMPM, Chaves County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Petro-Source Partners Ltd. or Condensate
Name of Authorized Transporter of Casinghead Gas Trident NGL. or Dry Gas
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge.
Address (Give address to which approved copy of this form is to be sent) 8790 Colfax Ave., Ste 230; Lakewood, CO 80215
Address (Give address to which approved copy of this form is to be sent) 10200 Grogans Mill Rd., The Woodlands, TX 77380
Is gas actually connected? When?

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

IV. COMPLETION DATA

Designate Type of Completion - (X) Oil Well Gas Well New Well W-
Date Spudded Date Compl. Ready to Prod.
Elevations (DF, RKB, RI, GR, etc.) Name of P-
Performances
OPER. OGRID NO. 17420
PROPERTY NO. 9044
POOL CODE 59469
EFF. DATE
API NO.
2079550
WTL POD
17407
23470
2079510
2079530
O-TRNSP. OGRID NO.
G-TRNSP. OGRID NO.
OIL POD NO.
GAS POD NO.
Date First New Oil
Length of Test
Actual Prod. During Test
GAS WELL
Actual Prod. Test - MCF/D
Testing Method (pilot, back pr.) Tubing Pressure (Shut-In)
Bbls. Condensate/MMCF
Casing Pressure (Shut-In)
Gravity of Condensate
Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature Jim C. Johnson
Printed Name Jim C. Johnson Vice-President
Date June 2, 1994
Telephone No. 505-293-4044

OIL CONSERVATION DIVISION

Date Approved JUN 08 1994

By
Title
Orig. Signed by Paul Kautz Geologist

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.

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

4) Separate Form C-104 must be filed for each well to be modified.