

ANTA FE

ILE

S.S.G.S.

AND OFFICE

TRANSPORTER

OIL

GAS

PERATOR

ORATION OFFICE

perator

Flag-Redfern Oil Company

Address

P.O. Box 11050Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well

Completion

Change in Ownership

Change In Transporter of:

Oil

Casinghead Gas

Dry Gas

Condensate

Other (Please explain)

Change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name

Well No.

Pool Name, Including Formation

Kind of Lease

Lease No.

Amoco Federal

8

Tom-Tom (San Andres)

State, Federal or Fee Fed. USA

NM-13418

Location

Unit Letter

Feet From The

Line and

Feet From The

2173

I

2183

South

853

East

Line of Section

Township

Range

NMPM,

Chaves

County

26

7-S

31-E

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil

or Condensate

Name of Authorized Transporter of Casinghead Gas

or Dry Gas

Tesoro Crude Oil Company

Cities Service Company

Address (Give address to which approved copy of this form is to be sent)

8700 Tesoro Drive, San Antonio, TX 78286

Address (Give address to which approved copy of this form is to be sent)

P.O. Box 300, Tulsa, OK 74102

Well produces oil or liquids, give location of tanks.

Unit

Sec.

Twp.

Rge.

Is gas actually connected?

When

M.

26

7-S

31E

Yes

November, 1979

THIS PRODUCTION IS COMMINGLED WITH THAT FROM ANY OTHER LEASE OR POOL, GIVE COMMINGLING ORDER NUMBER:

COMPLETION DATA

Designate Type of Completion - (X)

Oil Well

Gas Well

New Well

Workover

Deepen

Plug Back

Same Res'v.

Diff. Res'v.

Date Spudded

Date Compl. Ready to Prod.

Total Depth

P.B.T.D.

Deviations (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

DEPTH SET

SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE

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-Bbls.

Water-Bbls.

Gas-MCF

AS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MMCF

Gravity of Condensate

Sealing Method (pitot, back pr.)

Tubing Pressure (Shut-in)

Casing Pressure (Shut-in)

Choke Size

CERTIFICATE OF COMPLIANCE

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

Judy Benton

(Signature)

Production Clerk

(Title)

July 2, 1984

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUL - 6 1984, 19

BY ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

TITLE

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.

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

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

RECEIVED

JUL 5 - 1984

CCO
HOSIS OFFICE