STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| NERGY AND MINERALS DEPARTMENT   |  |   | Form C-104<br>Revised 10-1-78   |
|---|--|---|---|
| Distainution  |  | ATION DIVE DN<br>ox 2088  |   |
| BANTA PE  |  | W MEXICO 87501  |   |
| U.8.G.8.  |  |   |   |
|   | REQUEST FO   | R ALLOWABLE   |   |
| AND   |  | AND   | •   |
| OPERATOR<br>PROMATION OFFICE  | AUTHORIZATION TO TRANS   | SPORT OIL AND NATURAL GAS   |   |
| Lively Energy & Dev   | elopment Corp.   |   |   |
| 777 South Post Oak  | Rd., Suite 222 Hous  | ton, Texas 77056  |   |
| Reason(s) for filing (Check proper box  |  | Other (Plans and int  |   |
| New Well KX   | Change in Transporter of:  |   | a mor highli  |
| Recompletion Change in Ownership  | Oil Dry G<br>Casinghead Gas Condo  |   | 3/1/82<br>ATTION TO \$4475  |
| If change of ownership give name<br>and address of previous owner   | The function of the state of th | AND A OFTAINED.   |   |
|   | i a more a transfer f  | FYOU DO NUT CONCUR \$-69:   | 23 4-1-82   |
| Lease Name  | Well No. Pool Name, Including I  | × 07,   |   |
| Conoco<br>Location  | 1 Undesig: Ch  | averoo SA State, Federa   | il or Fee Fee   |
| Unit Letter L : 19  | 80_Feet From TheSL   | ne and <u>660</u> Feet From   | TheW  |
| Line of Section 15 Tou  | mship 85 Range   | 33E , ммрм, Chav  | Cour  |
| DESIGNATION OF TRANSPOR   | TER OF OIL AND NATURAL G   | AS  |   |
| Name of Authorized Transporter of Oil   | X or Condensate  | Address (Give address to which appro  |   |
| Mobil Oil Corp.<br>Name of Authorized Transporter of Cas  |  | P.O. Box 900 Dalla  |   |
| Name of Authorized Transporter of Cat   | singhead Gas 🗍 or Dry Gas 🗍  | Address (Give address to which appro  | ved copy of this form is to be sent)  |
| If well produces oil or liquids,<br>give location of tanks.   | Unit Sec. Twp. Rge.<br>L 15 8S 33E   | Is gas actually connected? Whi<br>NO  | en  |
| If this production is commingled with   | th that from any other lease or pool,  | give commingling order number:  |   |
| Designate Type of Completic   | Oil Well Gas Well  | New Well Workover Deepen  | Plug Back Same Res'v. Diff. Re  |
| Designate Type of Completic   | Date Compl. Ready to Prod.   | Total Depth   |   |
| 10-19-81  | 11-21-81   | 4512'   | P.B.T.D.<br>4472'   |
| Elevations (DF, RKB, RT, GR, etc.)<br>KB 4394', GL 4382'  | Name of Producing Formation<br>San Andres  | Top Oll/Gas Pay<br>4130'  | Tubing Depth<br>4367'   |
| Perforatione<br>4276' 4399'   |  |   | Depth Casing Shoe   |
|   | TUBING, CASING, AN   | D CEMENTING RECORD  | 4512'   |
|   | CASING & TUBING SIZE   | DEPTH SET   | SACKS CEMENT  |
| 12-1/4"   | 8-5/8" csg<br>4-1/2" csg   | 1833'   | 795   |
| /-1/8   | <u>4-1/2" csg</u><br>2-3/8" tbg  | 4512'   | 400   |
|   |  | 4214.00   |   |
| . TEST DATA AND REQUEST F(<br>OIL WELL  |  | after recovery of total <del>volume of load all</del><br>epth or be for full 24 ho <b>urs</b> )       | and must be equal to or exceed top a  |
| Date First New Oil Run To Tanks   | Date of Test   | Producing Method (Flow, pump, gas lij   | (t, stc.)   |
| 11-25-81  | 12-1-81  | Pump  | •   |
| Length of Teet<br>24 hrs  | Tubing Pressure<br>20#   | Casing Pressure<br>20#  | Chore Size<br>NA  |
| Actual Prod. During Test  | Oil-Bbis.  | Water-Bbis.   |   |
| 31 bbls   | 31   | 9 ·   | 0   |
| GAS WELL  |  |   |   |
| Actual Prod. Teet-MCF/D   | Length of Teel   | Bbis. Condensate/MMCT   | Gravity of Condensate   |
| Teeting Method (pirot, back pr.)  | Tubing Pressure (Shut-is)  | Casing Pressure (Shut-La)   | Choke Size  |
| . CERTIFICATE OF COMPLIANC  | CE   | OIL CONSERVAT   | I<br>ION <sub>2</sub> DIVISION  |
| I hereby certify that the rules and r   | egulations of the Oil Conservation   | APPROVED  |   |
| Division have been complied with and that the information given<br>above is true and complete to the best of my knowledge and belief. |  | BYSimol 57  |   |
|   |  | TITLE   |   |
|   | <b>,</b>   |   | compliance with RULE 1104.  |
| Buce R. Su  | <u>vel</u>   | If this is a request for allow  | able for a newly drilled or deepe   |
| President   |  | well, this form must be accompany<br>tests taken on the well in accor<br>All sections offthis form mu | hied by a tabulation of the deviat<br>dance with RULE 111.<br>at be filled out completely for all |
| 12-3-81 (Tir  | le)  | able on new and sucompleted we  | 110.  |
|   | 10)  | well name or number; or transport   |   |
|   |  | Separate Forme C-104 must completed wells.  | be filed for each pool in mult  |