DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION SANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-11 Effective 1-1-55 FILE **GNA** AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS U.S.G.S. LAND OFFICE OIL TRANSPORTER GAS OPERATOR PROBATION OFFICE Operator LAYTON ENTERPRISES, INC. Address 3103 - 79th Street, Lubbock, Texas 79423 Other (Please explain) Reason(s) for filing (Check proper box) Change in Transporter of: Injection Well Dry Gas OII Recompletion (Change Effective September 8, 1976) Condensate Change in Ownership X Casinghead Gas If change of ownership give name MURPHY MINERALS CORPORATION, P.O. Drawer 2164, Roswell, N. Mex. 88201 and address of previous owner. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Tract #27 State, Federal or Fee Fee 4 Caprock Queen (Lea) No Caprock Queen Unit Location 660 660 Feet From The North Line and Feet From The Unit Letter 32E 135 Township Range . NMPM. County Line o! Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) When Is gas actually connected? Unit Sec. Twp. P.ge. 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: COMPLETION DATA Same Res'v, Diff, Res'v Deepen Plug Back Oil Well Gas Well New Well Workover Designate Type of Completion - (X) Date Compl. Ready to Prod. P.B.T.D. Total Depth Top Oli/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (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) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Presaure Length of Test Water - Bbls. 011-8516. Actual Pred. During Test GAS WELL Gravity of Condensate Bbla. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Casing Pressure (Shut-in) Choke Size Tubing Pressure (Shat-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION CERTIFICATE OF COMPLIANCE

I horeby 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.

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President, Layton Enterprises, Inc

ats 2 | 1976 APPROVED_

Orig. Signed by BY__ John Runyan

TITLE _ **Geologist**

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the deviational taken on the well in accordance with MULE 111.

All sections of this form must be filled out completely for allo able on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of own ill name or number, or transporten or other such change of condition

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