

| | | |
|------------------|-----|--|
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Effective 1-1-65

Operator
SAMEDAN OIL CORPORATION

Address
900 Wall Towers East - Midland, TX 79701

Reason(s) for Filing (Check proper box)

| | | | | |
|---------------------|-------------------------------------|---------------------------|--------------------------|--------------------------------------|
| New Well | <input checked="" type="checkbox"/> | Change in Transporter of: | | Other (Please explain) |
| Recompletion | <input type="checkbox"/> | Oil | <input type="checkbox"/> | CASINGHEAD GAS MUST NOT BE |
| Change in Ownership | <input type="checkbox"/> | Casinghead Gas | <input type="checkbox"/> | PLACED IN POOL 11/18/82 |
| | | Dry Gas | <input type="checkbox"/> | UNLESS AN EXCEPTION TO R-4070 |
| | | Condensate | <input type="checkbox"/> | IS OBTAINED. |

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

North King Devonian
Will do it R-6912 3-1-82

II. DESCRIPTION OF WELL AND LEASE

| | | | | | |
|--|----------------------|---|--|-----|-----------|
| Lease Name Speight | Well No. 1 | Pool Name, Including Formation Undesignated | Kind of Lease State, Federal or Fee | Fee | Lease No. |
| Location Unit Letter B ; 810 Feet From The North Line and 1980 Feet From The East Line of Section 3 Township 13-S Range 37-E , NMPM, LEA County | | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|--|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Western Oil Transport - Amoco Trucks | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 - Houston, TX 77001 |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> NONE (Warren possible - no contact yet.) | Address (Give address to which approved copy of this form is to be sent) |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. Is gas actually connected? When |
| | B 3 13-S 37-E No. |

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 <input checked="" type="checkbox"/> | Gas Well <input type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res't'v. <input type="checkbox"/> | Diff. Res't'v. <input type="checkbox"/> |
| Date Spudded 8-23-81 | Date Compl. Ready to Prod. 10-23-81 | Total Depth 12,136' | | P.B.T.D. 12,114' | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3887.1' GR | Name of Producing Formation Devonian | Top Oil/Gas Pay 12,108' | | Tubing Depth 11,815' | | | | |
| Perforations 12,108' - 12,113' | | | | Depth Casing Shoe 12,116' | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | SACKS CEMENT | | | | |
| 17 1/2" | 13 3/8" | 399' | | 425 sxs Class "C" | | | | |
| 12 1/4" | 8 5/8" | 4500' | | 800 sx Lite wght/400 "C" | | | | |
| 7 7/8" | 5 1/2" | 12,116' | | 400 sxs Class "H" | | | | |
| | 2 7/8" | 11,815' | | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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)

| | | | |
|--|---------------------------------|--|-----------------------------|
| Date First New Oil Run To Tanks 10-29-81 | Date of Test 10-30-81 | Producing Method (Flow, pump, gas lift, etc.) Flow | |
| Length of Test 24 hours | Tubing Pressure 620 | Casing Pressure 100 | Choke Size 14/64" |
| Actual Prod. During Test 638 | Oil-Bbls. 638 | Water-Bbls. 19 | Gas-MCF 240 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (pitot, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

I hereby 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.

Vertis Diamond
VERTIS DIAMOND (Signature)

DIVISION CLERK
(Title)

November 02, 1981
(Date)

OIL CONSERVATION COMMISSION

APPROVED _____, 19 _____

BY **Jerry Saxton** (Orig. Signed By)

TITLE **Dist. L. Supv.**

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 multiple completed wells.