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

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-  
Effective 1-1-65

|   |   |
|---|---|
| Operator<br>SHELL OIL COMPANY                           |   |
| Address<br>P. O. BOX 991, HOUSTON, TEXAS 77001          |   |
| Reason(s) for filing (Check proper box)                 | Other (Please explain)<br>FORMERLY:   |
| New Well <input type="checkbox"/>                       | Change In Transporter of <input type="checkbox"/>                           |
| Recompletion <input type="checkbox"/>                   | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>               |
| Change In Ownership <input checked="" type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |
| New Mexico A State #6                                   |   |

If change of ownership give name and address of previous owner Exxon Corp. P.O. Box 1600 Midland, TX 79702

|                               |          |                              |  |
|-------------------------------|----------|------------------------------|--|
| DESCRIPTION OF WELL AND LEASE |          | Kind of Lease                | Lease No.  |
| Lease Name                    | Well No. | State, <del>XXXXXXXXXX</del> |  |
| N.Hobbs(G/SA)Unit Sec. 25     | 231      |                              |  |
| Location                      |          |                              |  |
| Unit Letter                   | K        | 2310                         | Feet From The South Line and 2310 Feet From The West |
| Line of Section               | 25       | Township                     | 18S Range 37E, NMPM, LEA Count                       |

|  |           |  |      |
|--|-----------|--|------|
| 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 <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> |           | P.O. Box 1910 Midland, TX 79702  |      |
| Shell Pipeline   |           | Address (Give address to which approved copy of this form is to be sent) |      |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>    |           | 4001 Penbrook St. Odessa, TX 79762                                       |      |
| Phillips Pipeline  |           |  |      |
| If well produces oil or liquids, give location of tanks.   | Unit      | Sec.   | Twp. |
|  |           |  | Pge. |
|  | NO CHANGE |  |      |
|  |           | Is gas actually connected?   | When |
|  |           | Yes  | NA   |

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

|                                    |                             |                 |          |                   |          |        |           |              |          |
|------------------------------------|-----------------------------|-----------------|----------|-------------------|----------|--------|-----------|--------------|----------|
| COMPLETION DATA                    |                             | Oil Well        | Gas Well | New Well          | Workover | Deepen | Plug Back | Same Hcst'v. | Diff. Re |
| Designate Type of Completion - (X) |                             |                 |          |                   |          |        |           |              |          |
| Date Spudded                       | Date Compl. Ready to Prod.  | Total Depth     |          | P.B.T.D.          |          |        |           |              |          |
| Elevations (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 OIL WELL |                 | (Test must be after recovery of total volume of load oil and must be equal to or exceed top of hole for this depth or be for full 24 hours) |            |
| 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  |

|                                  |                           |                           |                       |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| GAS WELL                         |                           | Bbls. Condensate/MCF      | Gravity of Condensate |
| Actual Prod. Test-MCF/D          | Length of Test            |                           |                       |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size            |

I. 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.

A. J. Fore  
(Signature)  
A. J. FORE, SENIOR ENGINEERING TECHNICIAN  
(Title)  
JANUARY 25, 1980  
(Date)

OIL CONSERVATION COMMISSION

APPROVED 1980-1-25, 19

BY Jerry Foster  
TITLE Asst. Engr.

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 flow tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for wells on new and re-completed wells.  
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of con