District I PO Box 1988, E	Bobbs, N	M 88241-1984	1			of New Me		Lincat		Revi	Form C-1 ised February 10, 19
District II PO Drawer DD	, Artesia,	, NM 80211-0	719	OIL CO	NSEF	RVATION	DIVIS	SION	Sub		Instructions on be ropriate District Offi
District III 1000 Rio Bruzo District IV	e Rd., Ai	star, NM 8741	10		PO	Box 2088 NM 8750	}			_	5 Cop
PO Bez 2008, S	Santa Fe,										AMENDED REPOR
1. [REQUE		ALLOW		E AND AI	JTHO	RIZAT	TON TO T	ANSPO	
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P. O. Midlaı			79702					\sim	ų CH	'Ramos for	Filmg Code ffec 1-1-95
• •	PI Nem	ber	T			* Pool Nas	let		Milline on		* Pool Code
30-0 25-				L	usk S	trawn					41589
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		e Locati	<u>⊿</u> on				JIIIIa	reuer			4
U or lot so.	Section	Townsh	ip Range	Lot.Ida	Fe	at from the		outh Line	Fost from the	East/West	Las Cosaty
I	29	195	32E			1650	5		990	E	Lea
UL er let ne.		n Hole L		Let Ida	4	at from the	Need	esth line			
							Norul/:		Fest from the	East/West	Lee County
" Las Code 	" Prod	F	Code ¹⁴ G	ns Connection	Dete	¹² C-129 Perm	it Number		* C-129 Effective	Date	¹⁷ C-129 Expiration Date
II. Oil a	nd Ga	s Transp	orters		I _						
"Trumper OGRID	rter		" Transports			* PO	D	" 0/G		" POD ULST	
02262			M Pipeli	ne Co.		20411	10	0			
		Box 600 San Ang	28 elo, Tex	as 7690)	6						
009171	1	GPM Gas	Corpora	tion		20411		G			•
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V. Produ	iced V	Vater									······
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spe	ia Dete		²⁴ Ready	Date		" דט			" PBTD		¹⁰ Perforations
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/7 122 14 /											
I. Well			Delivery Date		Test Date		" Test Les				
						•	TOK LA	ugu a	* Tog. Pr	acu re	¹⁴ Ceg. Pressure
" Choke	51+		" Oil		G 197		4 G#		- AOI	,	* Test Marriel
" I hereby ceruf	y that the	rules of the O	il Conservation	Division have	been com	plied			I	<u></u>	
with and that the knowledge and b	informat	ion given abov)	e is true and co	apiete to the b	est of any		OI	L CON	SERVATI	ON DIV	ISION
Signature:	ST	Jelle	A D	ush)	Approved	or: OF		L SIGNED B	Y	
	Shel]	ley Bush	υÜ			Title:	_		D REP. II	·	
		ion Anal				Approval	Date:		2 4 1995		
Dele: 2-15				915/571-							
∵ir thus is a ch	ange of c	perator fill in	the OGRID n	umber and nat	me of the	previous operat	o r				
	Previou	Operator Si	goature			Prister	Name			Title	Date
										1146	UNK

Submit 5 Copies Appropriate District C DISTRICT 1	ffice		Egy, M	State of inerals and N	New Mexi Vatural Reso		partmen.	•		 Form C-104 Revised 1-1-89
P.O. Box 1980, Hobb DISTRICT II P.O. Drawer DD, And	1, NM 88240				Box 2088					See Instructions at Bottom of Page
<u>DISTRICT III</u> 1000 Rio Brazos Rd., I.	Aziec, NM 8741	REQI	JEST FO	ta Fe, New R ALLOW	ABLE AN	D AUTH	ORIZA			
Operator Parker &	Parsley D							Well	API No. 3002520877	
Address	3178, Mid		-					<u> </u>		
Reason(s) for Filing (xas /9	702		Other (Pleas	e explain)			
New Well Recompletion		Oil		Tansporter of:	1	·				
Change in Operator	X	Casinghea	_	Condensate	Ì					
If change of operator g and address of previous	ive name s operator	Damson	0il Corp	poration,	3300 N	. "A",	Bldg.	8,1	idland, T	x. 79705
IL DESCRIPTIC	ON OF WELL	L AND LEA								
Southern Ca	lifornia l	Federal	Well No. P 4	ooi Name, Inclu Lusk S	-	a.			of Lease Federal or Fee	Lease No. NMLCO63586
Location Unit Letter	I		90 F	eet From The _	E1	ine and	1650	F	et From The	S Line
Section	29 Towns	hip 19	9s r	ange 3	2E	NMPM,		Lea		County
III. DESIGNATI	ON OF TRA	NSPORTE	R OF OIL				to which		copy of this form	
Texas New	Mexico Pi	ipeline (<u>Co.</u>		P.0. 1	<u>Box 252</u>	8, Ho	bbs,	N.M. 88	3240
Name of Authorized T Phillips	le natl Jas Botto Leum	Co. GPM	Gas Corp	Dry Gas	1/2001 1	Donhroo	1- 0	approved	copy of this form	<i>is to be sent)</i> 19762
If well produces oil or give location of tanks.	liquids,	Undit F		February 95 32E	Is gat actua	ally connecte	nd?	When		5702
If this production is con IV. COMPLETIC	uningled with that DN DATA	from any othe	r lease or poo	l, give comming	gling order nu	mber: _		<u> </u>		
Designate Type	of Completion	- (X)	Oil Well	Gas Well	New Wel	1 Workov	er E	eepen	Plug Back San	e Res'v Diff Res'v
Date Spudded		Date Compl	. Ready to Pr	xd.	Total Depth				P.B.T.D.	
Elevations (DF, RKB, R	T, GR, etc.)	Name of Pro	ducing Forma	ution	Top Oil/Ga	s Pay			Tubing Depth	
Perforations									Depth Casing She	×
HOLE S	7F		JBING, CA	SING AND	CEMENT					
	·······					DEPTHS	<u>SET</u>		SACH	(S CEMENT
				····						
V. TEST DATA A	ND REOLIES	T FOR AL	LOWAD	F						
OIL WELL σ	est must be after r	ecovery of tota	I volume of la	ad oil and must	be equal to o	r exceed lop	allowable	for this	depth or be for ful	24 hours 1
Date First New Oil Run	To Tank	Date of Test			Producing M	lethod (Flow	, pump, g	as lift, et	:.)	
Length of Test		Tubing Press	ure		Casing Press	ure			Choke Size	
Actual Prod. During Test		Oil - Bbls.			Water - Bbls	<u> </u>			Gas- MCF	
GAS WELL		L			<u> </u>					
Actual Prod. Test - MCF	/D	Length of Tea	4		Bbls. Conden	sate/MMCF			Gravity of Conden	sate
esting Method (pilot, bac	:k pr.)	Tubing Pressu	ire (Shut-in)		Casing Press	ire (Shut-in)			Choke Size	
I. OPERATOR I hereby certify that th Division have been con is true and complete to	e rules and regulat mplied with and th	tions of the Oil	Conservation		_	DIL CC			tion div 1AR 2 9 1	
Signature Annu	m / /	Goran M		Real	By_		inal si		or Jeary Sex Upervisor	TON
Printed Name / 2-/9-9/	<u> </u>	15-683-	<u>71. O De</u> Title 476 9	succig	Title_		DISTR			
Date			Telephone	No.	1					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111. 2) All sections of this form must be filled out for allowable on new and recompleted wells.

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes. 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

		jan tana tana tana tan	A BODDELE STREAM	
1	Bitt A IP UT IBH		DX 2088	
	96816 70 70.0	SANTA FE, NEL	W MEXICO 875	
	W.0. 0.A.			
	LAND DIFICE	REQUEST FO	R ALLOWABLE	
	TRANSPORTER CAL	•	ND	
	PPERATOR	AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS	
I.	PADAATION OFFICE			
	Damson Oil Corporation	:		
	Address			
	3300 North "A" Bidg.	8, Suite 100, Midland, Te		
	Reason(s) for filing (Check proper box,		Other (Please explain)	
	New Veli	Change in Transporter of: Oil Dry G		
	Recompletion	Casinghead Gas Cande	Effective Novemb	er 1, 1984
	Change in Ownership X			
	If change of ownership give name	Dorchester Gas Corporat	ion, P. O. Box 96, Hobbs,	New Mexico 88240
	and address of previous owner			
١.	DESCRIPTION OF WELL AND	LEASE		
-	Louse Name	Well No. Pool Name, Including F		LC-
	Southern California Fee	deral 4 Lusk (Strawn		Federal 063586
	Location		1650	n. Couth
	Unit Letter :99	0Feet From TheLit	ne and1650Fout From '	The South
	Line of Section 29 T	mahip 195 Range	32Е , МИРМ. Lea	- Count
ļ				······································
1.	DESIGNATION OF TRANSPORT	FER OF OIL AND NATURAL GA	AS	
	Name of Authorized Transporter of Oli	Condensate	Address (Give address to which appro-	
	Texas New Mexico Pipel:		P. O. Box 2528, Hobbs, Address (Give address to which approv	
	Name of Authorized Transporter of Can Phillips Petroleum Cor		4001 Penbrook St., Odes	•
	Phillips Fectoreum cor	Unit Sec. Twp. Rge.	1s gas actually connected?	
	If well produces oil or liquide, give location of tanks.	I 29 195 32E		at completion
		<u></u>		
	If this production is commingled wit COMPLETION DATA	in that from any other lease of pool,	give comminging order number.	
	<u>г</u>	Oil Well Gas Well	New Well Workover Derpen	Plug Bock Same Res'v. Diff. Res
	Designate Type of Completion			P.B.T.D.
1	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.1.D.
			Top Oil/Gas Pay	Tubing Depth
•	Eleverisons (DF, RKB, RT, GR, etc.)	Name of Producing Formation		
	Perforations			Depth Casing Shoe
	Feitoiditois			
		TUBING, CASING, ANI	D CEMENTING RECORD	· · · · · · · · · · · · · · · · · · ·
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		l		
			fier recovery of social volume of load oll	and must be sevel to or exceed top als
	TEST DATA AND REQUEST FO	able for this de	epch or be for full 24 hours)	
ī	Date Farst New Oil Run To Tanks	Dote of Test	Producing Method (Flow, pump, gas lig	(t, etc.)
				Choke Size
1	Length of Test	Tubing Pressure	Casing Pressure	
			Water-Bbls.	Gas - MCF
	Actual Prod. During Test	OII-Bhis.		
		<u></u>		
	GAS WELL			
I	Ariuni Prod. Test-MCF/D	Length of Test	Bbla. Condensate/MMCF	Grovity of Condensate
				Chote Size
I	Testing Method (publ. back pr.)	Tubing Presews (Shnt-12)	Cosing Pressure (Sbut-1B)	C. 2010 3110
l		1		
1.	CERTIFICATE OF COMPLIANC		DIL CONSERVAT	1984
		- Never of the Dil Conservation	APPROVED UEU 10	1001
	I hereis certify that the rules and re Division have been complied with	and that fir information given		
4	above is true and complete to the	best of my knowledge and belief.	BY ORIGINAL SIGNAD BY	
			8-2-48 \$25\$ \$140 \$1.4 \$25 \$140 \$1.4 \$25 \$140 \$1.4 \$25 \$25 \$25 \$25 \$25 \$25 \$25 \$25 \$25 \$25	2043), M 1.23% J 27 .
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	en Personal de la companya de la company			, , , , , , , , , , , , , , , , , , ,
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			Separate Forma Collide mus	i te firifitor each port an multi-
			, and the second s	

REC 1 2 1984

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NOUSE OFFICE

BTATE OF NEW MEXICO	OIL C	ONSERVI	TION	DIVISIO	1	Form C-104 Revised 10-1-
04 04 10000 010000		P. O. 80	X 2088			
	SAN	ITA FE, NEV		0 07301		
N. U. B.		REQUEST FO	S ALLOW	ABLE		
DAANSPONTER OIL		A	ND		AL (CAR	
PTRATOR	AUTHORIZATI	ION TO TRANS	PORT OIL	AND NATUR	AL (JAJ	
Dorchester Gas C	Corporation					
Dorchester Gas C					<u></u>	
P. O. Box 96, Hot		0 88240		Other (Please	explains	<u></u>
Reason(s) for filing (Check proper box) New Wall	/ Change in Tran	1777 B				
Recompletion	Oil Casinghead Gai	Dry C Conde	F			
Change in Ownership		·				
f change of ownership give name and address of previous owner						
DESCRIPTION OF WELL AND	LEASE					r
Lease Name	Well No. Fool	Name, Including			Kind of Lease State, Federal	or Foo Federal
So. California Federal	4	Lusk Strawr	l			LC-063
Unit Letter 1 ; _ 990	Feet From The	EastL	ne and	1650	_ Feet From T	he <u>South</u>
29 -	mahip 19 S	Range	32 E	, NMPM	Lea	
DESIGNATION OF TRANSPOR	TER OF OIL AND) NATURAL G	1120.000			ed copy of this form is to b
Texas New Mexico Pipeli	ine Co.	- D C -1	P. O.	. Box 2528	Hobbs, N	ew Mexico 88240 ed copy of this form is to b
Phillips Petroleum Corpo		or Dry Gas 🗌				a, Texas 79762
If well produces oil or liquide,	Unit Sec.	Twp. Rge.	is gas o	ctually connect	ed? Whe	n
give location of tanks.	F 92	<u>195 : 32</u>		yes	NI	<u>at completion</u> /A
if this production is commingled wi	ith that from any oth	her lease or pool	, give com	and the second se		
COMPLETION DATA Designate Type of Completi	on - (X)	all Gas Well	New Wel	Workover	l Deepen I I	Plug Back Same Restv.
Date Spudded	Date Compl. Ready	to Prod.	Total D	opth		P.B.T.D.
	Name of Producing	Essentition	Top Oll	/Gas Pay	<u></u>	Tubing Depth
Lievations (DF, RKB, RT, GR, etc.)	Name of Producting	7 Officiation		•		
						D. I. Carlos Shee
Perforations						Depth Casing Shoe
	тиві	NG, CASING, A	ND CEMEN	TING RECOR	2D	
	the second se	NG, CASING, A	ND CEME	NTING RECON		Depth Casing Shoe
Perforations	the second se		ND CEME			
Perforations	the second se					
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HOLE SIZE	CASING & T		after recov depth or be	DEPTH S	ET	SACKS CEME and must be equal to or exc
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