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Supersedes Old C-104 and C-110

NEW MEXICO OIL CONSERVATION COMMISSIC . Form C-104 REQUEST FOR ALLOWABLE Effective 1-1-65 **AND** AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Tamarack Petroleum Company, Inc. 910 Building of the Southwest, Midland, Texas 79701
Other (Please explain) Reason(s) for New Well Change in Transporter of: Recompletion Oil Dry Gas Effective 11-1-68 Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner __ Earl G. Colton, D204 Petroleum Center, San Antonio, Texas II. DESCRIPTION OF WELL AND LEASE ell No. Pool Name, Including Formation Kind of Lease Lease No. State, Federal or Fee Texaco Moran Pearl Queen Fee ; 1650 Feet From The North Line and 660 H Feet From The East Line of Section Township 198 Range 35E , NMPM, Lea County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) The Permian Corporation Eox 2119, Midland, Texas 79701 Name of Authorized Transporter of Casinghead Gas 🛴 or Dry Gas Address (Give address to which approved copy of this form is to be sent) Warren Petroleum Corporation Box 1589, Tulsa, Oklahoma 74102 Unit If well produces oil or liquids, give location of tanks. Twp. Is gas actually connected? When 22 19S Yes NA If this production is commingled with that from any other lease or pool, give commingling order number: **COMPLETION DATA** New Well Workover Plug Back | Same Res'v. Diff. Res'v. Designate Type of Completion - (X) 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 V. TEST DATA AND REQUEST FOR ALLOWABLE (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) OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Length of Test Tubing Pressure Casing Pressure Choke Size Actual Prod. During Test Cil-Bbls. Water - Bbls. Gas - MCF **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 /I. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION NOY 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. Geologist TITLE 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. Vice President All sections of this form must be filled out completely for allowable on new and recompleted wells. (Title) November 11, 1963 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. (Date)

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