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| NEW MEXICO OIL CONSERVATION COMMISSION | |
| REQUEST FOR ALLOWABLE | |
| AND | |
| AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | |
| LAND OFFICE | |
| TRANSPORTER | OIL |
| | GAS |
| OPERATION | |
| OPERATION 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-105
Effective 1-1-65

READ & STEVENS, INC.

P.O. Box 2126, Roswell, NM 88201

Reason(s) for filing (check proper box)

Other (Please explain)

New Well ☐
Re-completion ☐
Change in Ownership ☐

Change in Transporter of:

Oil ☐
Casinghead Gas ☐

Dry Gas ☐
Condensate ☐

Gas Connection

If change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|---------------|---|---|----------------------|
| Lease Name State "BG" | Well No. 3 | Pool Name, Including Formation Quail Queen | Kind of Lease State, Recovery Permit | Lease No. OG-1847 |
| Location Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line of Section 14 Township 19S Range 34E, NMPM, Lea County | | | | |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|------------|-------------|-------------|-----------------------------------|-----------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Western Crude Oil, Inc. | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1142, Midland, TX 79701 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corporation | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, Oklahoma | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit H | Sec. 14 | Twp. 19S | Rge. 34E | Is gas actually connected? yes | When 6/18/77 |

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

COMPLETION DATA

| | | | | | | | | |
|------------------------------------|-----------------------------|----------|-----------------|----------|--------|-------------------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| Date Spudded | Date Compl. Ready to Prod. | | Total Depth | | | P.B.T.D. | | |
| Elevations (DF, RAB, 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 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)

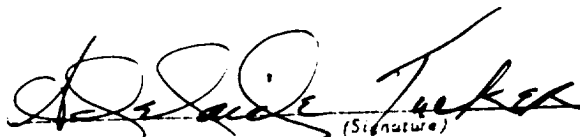
| | | | |
|---------------------------------|-----------------|---|------------|
| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Action Prod. During Test | Oil-Bble. | Water-Bble. | Gas-MCF |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bble. Condensate/MCF | Gravity of Condensate |
| Testing Method (pilot, back pr.) | Tubing Pressure (shot-in) | Casing Pressure (shot-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.


(Signature)

Production Clerk

(Title)

April 17, 1978

(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 19 1978, 19

BY Orig. Signed by

Jerry Sexton

TITLE Dist 1, Supv.

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

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviator tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells 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.