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LAND OFFICE		<u> </u>		
TRANSPORTER	OIL			
INANSPORTER	G A S			
OPERATOR			L	
PRORATION OFFICE			<u> </u>	

## NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE

Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  API No. 30-025-26993  PRORATION OFFICE  OPERATOR OPERATOR OPERATOR PRORATION OFFICE  OPERATOR OP	Legse No. A-1320
LAND OFFICE  IRANSPORTER OIL   GAS   OPERATOR   GAS   OPERATOR   O	
PRORATION OFFICE  OPERATOR PRORATION OFFICE  OPERATOR Phillips Petroleum Company  Address Room 401, 4001 Penbrook St., Odessa, Texas 79762  Reason(s) for filing (Check proper box) New We!! Recompletion Change in Ownership Castinghead Gas Condensate  If change of ownership give name and address of previous owner  Lease Name East Vacuum Grayburg 7017  Lease Name East Vacuum Grayburg 7017  Vacuum Gb/San Andres  Location Unit Letter Line of Section 28  Township 17-S  Range 35-E  NMPM, Lea  In DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
OPERATION OFFICE OPERATOR PRORATION OFFICE OPERATOR PRORATION OFFICE OPERATOR PRORATION OFFICE OPERATOR PRORATION OF WELL AND LEASE  Lease Name East Vacuum Graybut g/017  Address Unit, Tract No. 2801  Location Unit Letter  Line of Section 28  API No. 30-025-26993  Other (Please explain)  NA  And Condensate  Vacuum Graybut g/017  Vacuum Gb/San Andres  State, Federal of Feet  Line of Section 28  Township 17-S  Range 35-E  NMPM, Lea  ADESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
PRORATION OFFICE  Operator  Phillips Petroleum Company  Address  Room 401, 4001 Penbrook St., Odessa, Texas 79762  Reason(s) for filing (Check proper box)  New We!!  Recompletion Change in Transporter of:  Oil  Recompletion Change in Ownership  Casinghead Gas Condensate  If change of ownership give name and address of previous owner  NA  DESCRIPTION OF WELL AND LEASE  Lease Name East Vacuum Graybutgg/017  Vacuum Gb/San Andres  Location Unit Letter  L  1 2410  Feet From The South Line and 200  Feet From The West  Line of Section 28  Township 17-S  Range 35-E  NMPM, Lea	
Phillips Petroleum Company  Address  Room 401, 4001 Penbrook St., Odessa, Texas 79762  Reason(s) for filing (Check proper box) New We!! X Change in Transporter of: Recompletion Oil X Dry Gas Condensate  If change of ownership Recompletion Casinghead Gas Condensate  If change of ownership give name and address of previous owner  DESCRIPTION OF WELL AND LEASE  Lease Name East Vacuum Graybut gy 017  Andres Unit, Tract No. 2801  Location Unit Letter L : 2410 Feet From The South Line and 200 Feet From The West  Line of Section 28 Township 17-S Range 35-E , NMPM, Lea  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Phillips Petroleum Company  Address  Room 401, 4001 Penbrook St., Odessa, Texas 79762  Reason(s) for filing (Check proper box)  New We!! X Change in Transporter of:  Recompletion Oil X Dry Gas Condensate  If change of ownership give name and address of previous owner  DESCRIPTION OF WELL AND LEASE  Lease Name East Vacuum Grayburg/017 Vacuum Gb/San Andres  Andres Unit, Tract No. 2801  Location  Unit Letter L 2410 Feet From The South Line and 200 Feet From The West  Line of Section 28 Township 17-S Range 35-E , NMPM, Lea  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Room 401, 4001 Penbrook St., Odessa, Texas 79762  Reason(s) for filing (Check proper box) New We!! X Change in Transporter of: Recompletion Oil X Dry Gas Condensate  If change of ownership give name and address of previous owner  DESCRIPTION OF WELL AND LEASE Lease Name East Vacuum Graybut g/017 Vacuum Gb/San Andres  Andres Unit, Tract No., 2801  Unit Letter / L ; 2410 Feet From The South Line and 200 Feet From The West  Line of Section 28 Township 17-S Range 35-E , NMPM, Lea  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
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Reason(s) for filing (Check proper box)  New We!!  Recompletion  Change in Transporter of:  Recompletion  Change in Ownership  Casinghead Gas  Condensate  If change of ownership give name and address of previous owner  DESCRIPTION OF WELL AND LEASE  Lease Name East Vacuum Graybur g/017  Andres Unit, Tract No. 2801  Location  Unit Letter  Line of Section 28  Township 17-S  Range 35-E  NAPPM, Lea  Other (Please explain)	
Reason(s) for filing (Check proper box)  New We!!	
Recompletion Oil X Dry Gas Condensate  If change of ownership give name and address of previous owner  DESCRIPTION OF WELL AND LEASE.  Lease Name East Vacuum Grayburg/017 Vacuum Gb/San Andres  Location  Unit Letter 1 2410 Feet From The South Line and 200 Feet From The West  Line of Section 28 Township 17-S Range 35-E , NMPM, Lea  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Change in Ownership   Casinghead Gas   Condensate    If change of ownership give name and address of previous owner   NA    DESCRIPTION OF WELL AND LEASE    Lease Name East Vacuum Grayburg/017   Vacuum Gb/San Andres    Andres Unit Tract No. 2801   Vacuum Gb/San Andres    Location   Unit Letter   L   2410   Feet From The South   Line and   200   Feet From The West    Line of Section   28   Township   17-S   Range   35-E   , NMPM,   Lea    DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
If change of ownership give name and address of previous owner NA  DESCRIPTION OF WELL AND LEASE  Lease Name East Vacuum Grayburg/017 Vacuum Gb/San Andres  Andres Unit, Tract No. 2801 Vacuum Gb/San Andres  Location  Unit Letter L : 2410 Feet From The South Line and 200 Feet From The West  Line of Section 28 Township 17-S Range 35-E , NMPM, Lea  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
DESCRIPTION OF WELL AND LEASE  Lease Name East Vacuum Grayburg/017 Vacuum Gb/San Andres  Location  Unit Letter / L	
DESCRIPTION OF WELL AND LEASE.  Lease Name East Vacuum Grayburg/017 Vacuum Gb/San Andres  Location  Unit Letter L	
Lease Name East Vacuum Grayburg/017   Vacuum Gb/San Andres   State, Federal of Feet   Food Name, including 1 State, Federal of Feet   State, Federal of Feet   Food Name, including 1 State, Federal of Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Feet   Food Name, including 1 State, Federal of Feet   Feet   Feet   Food Name, including 1 State, Federal of Feet   Fee	
Lease Name East Vacuum Grayburg   O17   Vacuum Gb/San Andres   State, Federal of Fee	
Andres Unit, Tract No. 2801 Vacuum Gb/San Andres  Location  Unit Letter L	A-1320
Andres Unit, Tract No. 2801   Vacuum 55, Sent Tract No. 2801   Vac	
Unit Letter L : 2410 Feet From The South Line and 200 Feet From The West  Line of Section 28 Township 17-S Range 35-E , NMPM, Lea  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Unit Letter; Feet From The	
Line of Section 28 Township 17-S Range 35-E , NMPM, Lea  DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	County
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Nome of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to	
DESIGNATION OF TRANSPURIER OF OIL AND INTURAL GAS    Name of Authorized Transporter of Oil   And or Condensate   Address (Give address to which approved copy of this form is to	
I Name of Adductived Transporter of Other Control of Co	be sent)
P.O. Boy 2528 Hobbs New Meyico 882	240
Texas-New Mexico Pipeline Co.  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to	be sent)
Name of Authorized Transporter of Cashinghas and Torical Property of Cashinghas and To	l l
Unit Sec. Twp. Rge. Is gas actually connected? When	
If well produces oil or liquids, 7. 200 117.5 25. F. Voc. 6-25-81	
give location of tanks.	
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 Res	v. Diff. Res'v.
Designate Type of Completion - (X) X	
P.B.T.D.	
12-3-80 2-26-81 4800' 4727	
Top Oil /Gas Pay Tubing Depth	
2062 CP 3072 5 RVR Grayburg/San Andres 4108'	
Depth Casing Shoe	_
Perforations 4512-4517, 4528-4535', 4542-4546', 4588-4604' 4800'	
TUBING, CASING, AND CEMENTING RECORD	
CASING & TUBING SIZE DEPTH SET SACKS CEN	IENT
2561 (-//00 ava Cl"\"\"\"\"/2% Cacl2	
circ d 170 s	
7-7/8" 5-1/2" 4800' (w/1100 sxs TLW w/10% DD, 12#/s	<u> </u>
(salt, followed w/400 sxs C1"C" w/6#/sx salt; ci	<u>rc'd 175</u> e
The must be offer recovery of folds volume by toda on and many of the must be offer recovery of folds volume by toda on and many of the must be offer recovery of folds volume by toda on and many of the must be offer recovery of folds volume by toda on and must be offer recovery of folds volume by toda on an and must be offer recovery of the contract of the contrac	exceed top allow
able for this depth or be for full 24 hours)	
OII. WELL Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.)	
6-25-81 insert pmp $2-1/2$ " x $1-1/2$ " x $16$ "	
Choke Size  Length of Test  Tubing Pressure  Casing Pressure  Choke Size	
Garrier at 1 = 1	· · · · · · · · · · · · · · · · · · ·
24 hrs	
24 hrs. ————————————————————————————————————	
24 hrs. ————————————————————————————————————	
24 hrs. —— Water-Bbls. Gas-MCF  Actual Prod. During Test Oil-Bbls.	<del></del>
24 hrs. — Water-Bbis. Gas-MCF  Actual Prod. During Test 42 48 16	
24 hrs.  Actual Prod. During Test  Oil-Bbls.  42  Water-Bbls.  Gas-MCF  48  16  Gravity of Condensate	<u>.</u>
24 hrs.  Actual Prod. During Test  Oit-Bbis.  42  48  Gas-MCF  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate	- D
24 hrs.  Actual Prod. During Test  Oil-Bbls.  42  48  Gas-MCF  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbls. Condensate/MMCF  Gravity of Condensate  Choke Size	5
24 hrs.  Actual Prod. During Test  Oil-Bbls.  42  48  Gas-MCF  48  16  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)	
24 hrs.  Actual Prod. During Test  Oil-Bbis.  42  48  Gas-MCF  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size	
24 hrs.  Actual Prod. During Test  Oil-Bbis.  42  48  Gas-MCF  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Oil Conservation Commission  Oil Conservation Commission	DN .
24 hrs.  Actual Prod. During Test  Oil-Bbis.  42  48  Gas-MCF  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  OIL CONSERVATION COMMISSION  APPROVED  APPROVED  APPROVED  APPROVED	
Actual Prod. During Test  Ott-Bbis.  42  48  Gas-MCF  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (shut-in)  Casing Pressure (shut-in)  Choke Size  OIL CONSERVATION COMMISSION  APPROVED  APPROVED  APPROVED  APPROVED	DN .
Actual Prod. During Test  Oil-Bbls.  42  48  Gas-MCF  48  16  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)  Oil Conservation  Commission have been complied with and that the information given  Description of the Oil Conservation of the Oil Conservatio	DN .
Actual Prod. During Test  Oil-Bbls.  42  48  Gas-MCF  48  16  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  APPROVED  APPROVED  APPROVED  APPROVED	DN .
Actual Prod. During Test  Oil-Bbls.  42  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  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.	) N , 19
Actual Prod. During Test  Oil-Bbis.  42  Water-Bbis.  Gas-MCF  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Bbis. Condensate/MMCF  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.  This form is to be filed in compliance with mut-	DN , 19
Actual Prod. During Test  Oil-Bbls.  42  48  Gas-MCF  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-is)  Cosing 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.  W. J. Mueller  This form is to be filed in compliance with RULL If this is a request for allowable for a newly driving the accompanied by a tabulation.	E 1104.
Actual Prod. During Test  Oil-Bbis.  Actual Prod. During Test  Oil-Bbis.  Gas-MCF  48  16  GAS WELL  Actual Prod. Test-MCF/D  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.  W. J. Mueller  This form is to be filed in compliance with Rule  If this is a request for allowable for a newly driven well, this form must be accompanied by a tabulation to the well in accordance with Rule on the well in accordance with Rule of the control of the Conservation on the well in accordance with Rule of the Conservation on the well in accordance with Rule of the Conservation on the well in accordance with Rule of the Conservation of the Co	E 1104. Illed or deepend of the deviation
Actual Prod. During Test  Actual Prod. During Test  42  48  Gas-MCF  48  Gravity of Condensate  Actual Prod. Test-MCF/D  Length of Test  Testing Method (pitot, back pr.)  Tubing Pressure (shut-in)  Casing Pressure (shut-in)  Choke Size  OIL CONSERVATION COMMISSION  APPROVED  Thereby 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.  W. J. Mueller  Senior Engineering Specialist  With a serious of this form must be accompanied by a tabulation well, this form must be accompanied by a tabulation will necessary and this form must be filled out comp	E 1104. Illed or deepend of the deviation
Actual Prod. During Test  Actual Prod. During Test  42  48  16  GAS WELL  Actual Prod. Test-MCF/D  Length of Test  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Senior Engineering Specialist  (Title)  Wignering Water-Bbis.  Gas-MCF  48  16  Gravity of Condensate  Costing Pressure (Shut-in)  Choke Size  OIL CONSERVATION COMMISSION  APPROVED  This form is to be filled in compliance with RULE 1  All sections of this form must be accompanied by a tabulation tests taken on the well in accordance with RULE 1  All sections of this form must be filled out companied on new and recompleted wells.	E 1104. lied or deepens of the deviation in. letely for allowances of owners.
Actual Prod. During Test  Actual Prod. During Test  Actual Prod. During Test  Actual Prod. Test-MCF/D  Length of Test  Actual Prod. Test-MCF/D  Length of Test  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  APPROVED  Thereby certify that the rules and regulations of the Oil Conservation Commission have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  W. J. Mueller  Senior Engineering Specialist  With is a request for sliowable for a newly drivel, this form must be accompanied by a tabulation well, this form must be accompanied by a tabulation of the well in accordance with RULE 1 acceptance of this form must be filled out comp	E 1104. Itled or despense of the deviation of the deviati

## INCLINATION REPORT

Least Name	OPERATOP	PHILLIPS PET. CO.	ADDRESS 4001 Penb	rook St., Odessa, TX 79762
LOCATION   County	•	East Vacuum GB/SA Unit	WELL NO. 017 FIE	LD Vacuum GB/SA
DEPTH   NOCLINATION DEGREES   DISPLACEMENT   ACCUMULATED	LEASE NAM			
DEPTH   INCLINATION DEGREES   DISPLACEMENT   ACCUMULATED	LOCATION_	(Unit L) 2410' FSL & 200' FWL Se	c 28, T-17-S, R-35-E	E, Lea County, NM
DEPTH   INCLINATION DEGREES   DISPLACEMENT   ACCUMULATED		ANCT E		DISPLACEMENT
3.0972   3.0973   3.0972   3.0973   3.0972   3.0973   3.0973   3.0973   3.0973   3.0973   3.0973   3.0973   3.0973   3.0973   3.0973   3.0973   3.0978   3	DEDMII		DISPLACEMENT	
## AFFIDAVIT:  ### Before me, the undersigned authority, appeared	DEPIR	INCLINATION BEGRESS	DIVINO	
### AFFIDAVIT:  ### Before me, the undersigned authority, appeared  ### DENISE LEAKE known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of is knowledge and belief such a content of the well identified above, and that to the best of his knowledge and belief such a content of the well identified above, and that to the best of his knowledge and belief such a content of the well identified above, and that to the best of his knowledge and belief such a content of the well identified above, and that to the best of his knowledge and belief such a content of the well identified above, and that to the best of his knowledge and belief such a content of the well identified above, and that to the best of his knowledge and belief such	7 <b>.</b> C	1/2	3.0972	3.0972
1207   3/4   4.4671   12.0013     1702		· · · · · · · · · · · · · · · · · · ·	4.4370	
1702 1/2 4.3065 16.3078 1702 1/2 9.1700 25.4778 2226 1 9.1700 25.4778 2713 1 8.5225 34.0003 2713 1 2.7772 36.7775 2925 3/4 2.7772 36.7775 3545 1 1/4 13.5160 50.2935 34134 1 10.3075 60.6010 4134 1 4.2175 64.8185 4800 1 1/2 11.1350 75.9535  I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.  CACTUS DRILLING COMPANY  TITLE OFFICE MANAGER  AFFIDAVIT:  Before me, the undersigned authority, appeared DENISE LEAKE known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such			4.4671	12.0013
2226 1 8.5225 34.0003 2713 1 8.5225 34.0003 27772 36.7775 2925 3/4 13.5160 50.2935 3545 1 1/4 13.5160 50.2935 4134 1 4.2175 64.8185 4375 1 4.2175 75.9535  I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.  CACTUS DRILLING COMPANY  AFFIDAVIT:  Before me, the undersigned authority, appeared DENISE LEAKE known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such		•		16.3078
2713 1 8.5225 34.0003 2713 1 2.7772 36.7775 2925 3/4 2.7772 36.7775 3545 1 1/4 13.5160 50.2935 3545 1 1/4 10.3075 60.6010 4134 1 4.2175 64.8185 4375 1 4.2175 64.8185 4800 1 1/2 11.1350 75.9535  I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.  CACTUS DRILLING COMPANY  TITLE OFFICE MANAGER  AFFIDAVIT:  Before me, the undersigned authority, appeared DENISE LEAKE known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such				25.4778
2713  3/4  2.7772  36.7775  3525  3/4  1 1/4  13.5160  50.2935  3545  1 1/4  10.3075  60.6010  4134  42175  64.8185  4800  1 1/2  11.1350  Title OFFICE MANAGER   AFFIDAVIT:  Before me, the undersigned authority, appeared DENISE LEAKE known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such				34.0003
2925 3/4 1 1/4 13.5160 50.2935 4134 1 10.3075 60.6010 4.3175 1 4.2175 64.8185 4800 1 1/2 11.1350  To my knowledge and belief.  CACTUS DRILLING COMPANY  AFFIDAVIT:  Before me, the undersigned authority, appeared known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such	2713			
3545 1 1/4 4134 1 10.3075 60.6010 41375 1 4.2175 64.8185 4375 1 1/2 11.1350 75.9535  I hereby certify that the above data as set forth is true and correct to the best of my knowledge and belief.  CACTUS DRILLING COMPANY  TITLE OFFICE MANAGER  AFFIDAVIT:  Before me, the undersigned authority, appeared Normal DENISE LEAKE known to me to be the person whose name is subscribed herebelow, who, on making deposition, under oath states that he is acting for and in behalf of the operator of the well identified above, and that to the best of his knowledge and belief such	2925			
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SEAL

GARLIN R. TAYLOR

NOTARY PUBLIC NEW 15

NOTARY BOND FILED WITH SECRETARY TONG

MY COMMISSION EXPIRES FEBRUARY 6, 1984 

Notary Public in and for the County of Lea, State of New Mexico