STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT Form C-104 Revised 10-01-78 Format 06-01-83 DISTRIBUTION OIL CONSERVATION DIVISION Page 1 SANTA PE P. O. BOX 2088 FILE SANTA FE, NEW MEXICO 87501 V.8.0.8. LAND OFFICE OIL TRANSPORTER REQUEST FOR ALLOWABLE OPERATOR AND PROBATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Oper mor PENNZOIL EXPLORATION AND PRODUCTION COMPANY Address P. O. DRAWER 1828, MIDLAND, TX 79702-1828 Other (Please explain) Reeson(s) for filing (Check proper box) NOTIFICATION OF COMPANY NAME CHANGE New Well Change in Transporter of: FROM PENNZOIL COMPANY TO PENNZOIL 011 Dry Gas Recenciet (co EXPLORATION AND PRODUCTION COMPANY Casinohead Gas Condensate Change in Ownership If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Kind of Lease Lease No. Lease Name State, Federal or Fee Fee 1 Shipp Strawn B. E. Shipp Estate Location 1980 Feet From The North 1980 Feet From The East G Line and Unit Letter Lea 17 S Range 37 E 4 , NMPM, County Township Line of Section III. 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 OII or Condensate Texas New Mexico Pipeline Company P. O. Box 2528, Hobbs, NM 88241-2528 Name of Authorized Transporter of Casinghead Gas EFFECTIVE: February 01 1998 rook, Odessa, TX Address (Give address to which approved copy of this form is to be sent) Phillips 66 Natural Gas GPM Gas Corporation 79765 When is gas actually connected? Unii Sec. Ree. Twp. If well produces oil or liquids, 1-18-86 G 4 17 · 37 Yes Unknown give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. OIL CONSERVATION DIVISION VI. CERTIFICATE OF COMPLIANCE 1000 I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED. 10 been complied with and that the information given is true and complete to the best of ORIGINAL SIGNED BY JERRY SEXTON my knowledge and belief. BY. DISTRICT I SUPERVISOR 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 Sinnature. tests taken on the well in accordance with RULE 111. PRODUCTION ACCOUNTANT

(Tule)

OCTOBER 1, 1988

(Date)

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

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