Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

## 

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Printed Name  OIL CONSERVATION DIVISION  Date Approved  By SIGNAL SERRY SEXTON  BY SIGNAL SERRY SEXTON  Title   | Operator  |  |                 |           |            |                       | Well API No.                   |              |                                       |                  |             |  |
|--|---|--|-----------------|-----------|------------|-----------------------|--------------------------------|--------------|---------------------------------------|------------------|-------------|--|
| P.O. BOX 4000, The Woodlands, Texas 77387-4000 Reacet in Filips (Check proper box) New Well   Chapse in Transporter of Chapse in Transporter of Chapse in Transporter of Chapse in Transporter of Chapse in Contensus  | Mitchell Energy Corporation   |  |                 |           |            |                       |                                |              | 30-025-31533                          |                  |             |  |
| Ramonic for Filing (Clack proper bear)   Change in Transporter of   Recomplicion   Cal   Change in Transporter of   Caloge in Operation   Caloge in Considerate   Caloge in Caloge i   | Address   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| Case      |   | , The W  | oodlan          | nds, !    | ľexas      | 77387-4               | 000                            |              |                                       |                  |             |  |
| Recomption   |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| Casinghout Gu Casinghout Gu Condessus Casinghout Gu Condessus Casinghout Gu Casinghout |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| If the production of the product o   | 1 '   |  | _               | •         |            |                       |                                |              |                                       |                  |             |  |
| Lease Name  Geronimo Pederal  Nell No.  Geronimo Pederal  Nell No.  Tonto, South (Yatea/7 Rivers)  Nell Sale (Lase  Lease No.  Geronimo Pederal  Nell No.  N |   | Casinghea  | d Gas 🔝         | Conden    | sate       |                       | ,                              |              |                                       |                  |             |  |
| IL DESCRIPTION OF WELL AND LEASE  Lease Name  Geronimo Pederal  10   |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| Last Name   Geronimo Pederal   10   Tonto, South (Yates/7 Rivers)   State (Sciente Pee   Name for Fill   | •   | ANDIE  | CE              |           |            |                       |                                |              |                                       |                  |             |  |
| Geronimo Pederal 10 Tonto, South Yates/7 Rivers State Composed Fig. 11 Continue Unit Lease C   |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| Location  Unit Letter C : 660 Feet From The BOTTh Line and 1575 Feet From The Weist Line Section 31 Township 19S Range 33E NMFM. Lea Commy  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil X or Condensus Address (Give address to which approved copy of this form is to be seat)  Texas - New Mexico Pipe Line Company  Address (Give address to which approved copy of this form is to be seat)  Texas - New Mexico Pipe Line Company  Address (Give address to which approved copy of this form is to be seat)  Townsor of Authorized Transporter of Casinghest Gas X or Dry Cas Address (Give address to which approved copy of this form is to be seat)  Townsor Authorized Transporter of Casinghest Gas X or Dry Cas Address (Give address to which approved copy of this form is to be seat)  Townsor Authorized Transporter of Oil X or Condensus Address (Give address to which approved copy of this form is to be seat)  Townsor Authorized Transporter of Casinghest Gas X or Dry Cas Dry | · ·   |  |                 | <u> </u>  |            |                       | Sec. of                        |              |                                       | Endamber Ena     |             |  |
| Usit Letter C : 660 Peet From The NOTTH Line and 1575 Peet From The West Line Section 31 Township 19S Range 33E NMPM Lea County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorited Transporter of Oil  | NM 6/111  |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| Section 31 Township 19S Range 33B NNPM, Lea County  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorited Transporter of Oil Conservation  Texage-New Mexico Pipe Line Company Address (Give address to which approved copy of this form is to be sent)  Texage-New Mexico Pipe Line Company Address (Give address to which approved copy of this form is to be sent)  Towns of Authorited Transporter of Casagepard Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)  Condoco, Inc.  If the production is commission of the Case of Dry Gas Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Condoco, Inc.  If the production is commission of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this form is to be sent)  Address (Give address to which approved copy of this | Value C 660 north 1575 root   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| ### DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of Oil  | Onit Letter : Feet From The HOLLII Line and 1373 Feet From The West Line  |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| ### DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of Oil  | Section 31 Township   | . 1  | 95              | Pance     | 33R        | N7                    | ATDIM.                         |              | T.o.a                                 |                  | Country     |  |
| Name of Authorized Transporter of Oil  | Joseph Towns  | Y  |                 | Kauge     | <u> </u>   | , 131                 | virivi,                        |              | пеа                                   |                  | County      |  |
| Name of Authorized Transporter of Oil  |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| P.O. Box 2528, Hobbs, NM 88240   | Name of Authorized Transporter of City  |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| Condition   Cond   |   |  |                 |           |            |                       | P.O. Box 2528, Hobbs, NM 88240 |              |                                       |                  |             |  |
| If well production is commingled with that from any other lease or pool, give continon of trainst.    D   31   198   33E   4-9-92  | Name of Authorized Transporter of Casing  | Address (Give address to which approved copy of this form is to be sent) |                 |           |            |                       |                                |              |                                       |                  |             |  |
| If this production is committagled with that from any other lease or pool, give committagling order number:  17. COMPLETION DATA  Designate Type of Completion - (X)  Date Spudded  Date Compl. Ready to Prod.  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING A 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil - Bbis.  Water - Bbis.  CASING Fressure (Shus-in)  Choke Size  OIL CONSERVATION DIVISION  Date Approved  First New Oil the the uses and regulations of the Oil Conservation  Division have been complied with and that the information gives above is true and complied to the bots of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Title  Title  Title  Title  |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| If this production is comminged with that from any other lease or pool, give commingeling order number:  IV. COMPLETION DATA  Designate Type of Completion - (X)  Date Spaced Date Compl. Ready to Prod.  TUBING, CASING AND CEMENTING RECORD  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING A 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 Tank  Date of Test  Date of Test  Tubing Pressure  Casing Pressure  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Title  Title  Title  | 1 1 1   | Unit Sec. Twp. Rge.  |                 |           |            | Is gas actually       | y connected?                   | When         | ?                                     |                  |             |  |
| Designate Type of Completion - (X)  Date Spaced Date Compl. Ready to Prod.  Date Spaced Date Completion - (X)  Date Spaced Date Compl. Ready to Prod.  Date Date Spaced Date Compl. Ready to Prod.  Date Of Date Spaced Depth P.B.T.D.  Depth Casing Depth Depth Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE DATA AND REQUEST FOR ALLOWABLE DEPTH SET SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Itest 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 Tank Date of Test Producing Method (Flow, pump, gast life, etc.)  Leogth of Test Date Oil Date of Test Casing Pressure Casing Pressure Choice Size  Actual Prod. During Test Oil - Bbis.  Water - Bbis. Condensate/MMCF Gravity of Condensate  Testing Method (piuot, back pr.)  VI. OPERATOR CERTIFICATE OF COMPLIANCE Interest year of the best of my knowledge and belief.  Signature George Mullen Reg. Affairs Specialist Title  Title  Title  Title   |   | <del>+</del>   |                 |           |            |                       |                                |              | 4                                     | -9-92            | <del></del> |  |
| Designate Type of Completion - (X)  Date Spadded  Date Compl. Ready to Prod.  Date Spadded  Date Compl. Ready to Prod.  Date Spadded  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Top Oil/Cas Pay  Tubing Depth  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 Task  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  CAS WELL  Actual Prod. Test - MCF/D  Length of Test  Total Depth  Producing Method (pion, back pr.)  Tubing Pressure (Shu-in)  Caing Pressure (Shu-in)  Caing Pressure (Shu-in)  Caing Pressure (Shu-in)  Date Approved  Signature  George Mullen  Reg. Affairs Specialist  Title  Title  Title   |   | from any oth   | er lease or p   | pool, giv | e comming  | ling order numi       | Der:                           |              | · · · · · · · · · · · · · · · · · · · |                  | <del></del> |  |
| Designate Type of Completion - (X)  Date Spadded  Date Compl. Ready to Prod.  Date Spadded  Date Compl. Ready to Prod.  Date Spadded  Date Compl. Ready to Prod.  Total Depth  Tubing Depth  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 Tank  Date of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. Test - MCF/D  Length of Test  Oil - Bbis.  Water - Bbis.  Gas- MCF  Gravity of Condensate  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the bed off my tangwedge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Title  Title  Title  | IV. COM LETION DATA   |  | 10:17/1         |           |            | 1                     |                                | · _          | 1                                     | 1                | <u> </u>    |  |
| Date Spudded  Date Compl. Ready to Prod.  Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Top Oil/Gas Pay  Tubing Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  CASING & TUBING SIZE  CASING & TUBING SIZE  DEPTH SET  SAC'S 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas- MCF  Testing Method (pivor, back pr.)  Tubing Pressure (Shui-in)  Casing Pressure (Shui-in)  Choke Size  OIL CONSERVATION DIVISION  Division have been complied with and that the information given above is true and complied to the bed off my trapwelge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Title  Title   | Designate Type of Completion  | - (X)  | 1 Oil Well      | 1 0       | as Well    | New Well              | Workover                       | Deepen       | Plug Back                             | Same Res'v       | Diff Res'v  |  |
| Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Top Oil/Gas Pay  Tubing Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SAC'S CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be other 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. Test - MCF/D  Length of Test  Oil - Bbls.  Water - Bbls.  Gas- MCF  Gravity of Condensate  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and complete to the bear of my improvinge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Title  Title  |   |  | Ready to        | Prod      |            | Total Denth           | L                              | L            | BBTD                                  | L                |             |  |
| TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  OIL WELL  OIL WELL  OIL OF 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. Test - MCF/D  Length of Test  OIL - Bbls.  Water - Bbls.  Gas. MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Bbls. Condensate/MMCF  Gravity of Condensate  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation  Division have been compiled with and that the information given above is true and complied to the best of my bigoverledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Title   | •   |  |                 |           |            |                       |                                |              | F.B.1.D.                              |                  |             |  |
| Perforations  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 toal 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Choke Size  Case MCF  Gas WELL  Actual Prod. During Test  Oil - Bbis.  Water - Bbis.  Gas - MCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shul-in)  Casing Pressure (Shul-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with add that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Title  Title  | Elevations (DF, RKB, RT, GR, etc.)  | Top Oil/Gas I  | Top Oil/Gas Pay |           |            | Tubing Depth          |                                |              |                                       |                  |             |  |
| 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 Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Choke Size  Gas-MCF  Gas-MCF  Tobing Method (plios, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and compilete to the best of my knowledge and belief.  Date Approved  By DESIGNAL SERVATION DIVISION  Date Approved  By DESIGNAL SERVATION  SWE'MCT (SUPPRVISOR)  Title  |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be after recovery of local 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Choke Size  Actual Prod. Test - MCF/D  Length of Test  Tubing Pressure (Shui-in)  Casing Pressure (Shui-in)  Casing Pressure (Shui-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist Printed Name  Title  Title  | Perforations  |  |                 |           |            |                       | <del></del>                    | <del> </del> | Depth Casin                           | g Shoe           |             |  |
| HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be after recovery of local 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Choke Size  Actual Prod. Test - MCF/D  Length of Test  Tubing Pressure (Shui-in)  Casing Pressure (Shui-in)  Casing Pressure (Shui-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist Printed Name  Title  Title  |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL  (Test must be ofter 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 Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Water - Bbls.  Gas- MCF  Gravity of Condensate  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my tangented and belief.  Signature  George Mullen  Reg. Affairs Specialist Printed Name  Title  Title   |   |  |                 |           |            |                       | NG RECOR                       | D            |                                       |                  |             |  |
| 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil - 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 (Shui-in)  Casing Pressure (Shui-in)  Choke Size  OIL CONSERVATION DIVISION  Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By DEIGNAL SENTERY SEXTON  BY DEIGNAL SENTERY SEXTON  BY DEIGNAL SENTERY SEXTON  BY DEIGNAL SENTERY SEXTON  Title  Title   | HOLE SIZE   | CASING & TUBING SIZE   |                 |           |            | DEPTH SET             |                                |              |                                       | SACKS CEMENT     |             |  |
| 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 Tank  Date of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil - 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 (Shui-in)  Casing Pressure (Shui-in)  Choke Size  OIL CONSERVATION DIVISION  Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By DEIGNAL SENTERY SEXTON  BY DEIGNAL SENTERY SEXTON  BY DEIGNAL SENTERY SEXTON  BY DEIGNAL SENTERY SEXTON  Title  Title   |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| 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 Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Actual Prod. During Test  Oil - 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 (Shul-in)  Casing Pressure (Shul-in)  Casing Pressure (Shul-in)  Choke Size  OIL CONSERVATION DIVISION  Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By DRIGHNAL SENTER SY SEXTON  BY SERRY SEXTON  BY TITLE  Title  |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| 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 Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Actual Prod. During Test  Oil - 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 (Shul-in)  Casing Pressure (Shul-in)  Casing Pressure (Shul-in)  Choke Size  OIL CONSERVATION DIVISION  Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By DRIGHNAL SENTER SY SEXTON  BY SERRY SEXTON  BY TITLE  Title  |   |  |                 |           |            |                       |                                |              | <u> </u>                              |                  |             |  |
| 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 Tank  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Length of Test  Actual Prod. During Test  Oil - 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 (Shul-in)  Casing Pressure (Shul-in)  Casing Pressure (Shul-in)  Choke Size  OIL CONSERVATION DIVISION  Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  By DRIGHNAL SENTER SY SEXTON  BY SERRY SEXTON  BY TITLE  Title  | V TEST DATA AND DECLIES   | TEODA  | LLOWA           | DIE       |            |                       |                                |              | 1,                                    |                  |             |  |
| Date First New Oil Run To Tank  Date of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Casing Pressure  Choke Size  Choke Size  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas-MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Bbls. Condensate/MMCF  Gravity of Condensate  Testing Method (picot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complete with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist Printed Name  Title  Title  |   |  |                 |           |            | h140                  |                                |              | a dameh an ha i                       | for full 24 hour | 1           |  |
| Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas- MCF  Gas- MCF  Gas- MCF  Casing Pressure  Choke Size  Gas- MCF  Gas- MCF  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist Printed Name  Title  Title  Title   |   |  |                 | oj toda o | u ana musi |                       |                                |              |                                       | or juit 24 now   | 3.)         |  |
| Actual Prod. During Test  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. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Printed Name  Title  |   | Date of Tes  | •               |           |            | l roccing in          | , 7                            |              |                                       |                  |             |  |
| Actual Prod. During Test  Oil - 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  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Printed Name  Title  | Length of Test  | Tubing Pressure  |                 |           |            | Casing Pressure       |                                |              | Choke Size                            | ··               |             |  |
| 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. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist Printed Name  Title  Title   |   | _  |                 |           |            | _                     |                                |              |                                       |                  |             |  |
| 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. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Printed Name  Title  Title  | Actual Prod. During Test  | Oil - Bbis.  |                 |           |            | Water - Bbls.         |                                |              | Gas- MCF                              | ,                |             |  |
| 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. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Printed Name  Title  Title  |   | İ  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist Printed Name  Title  Title  | GAS WELL  |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen Reg. Affairs Specialist Printed Name  OIL CONSERVATION DIVISION  Date Approved  By DEMONDAL SERVE BY JERRY SEXTON  Title   | Actual Prod. Test - MCF/D   | Length of Test   |                 |           |            | Bbls. Condensate/MMCF |                                |              | Gravity of Condensate                 |                  |             |  |
| VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  George Mullen  Reg. Affairs Specialist  Printed Name  OIL CONSERVATION DIVISION  Date Approved  By DRIGHT I SUPPRVISOR  Title  |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.    OIL CONSERVATION DIVISION   Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved       Date Approved     Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved  | Testing Method (pitot, back pr.)  | Tubing Pressure (Shui-in)  |                 |           |            | Casing Pressu         | Casing Pressure (Shut-in)      |              |                                       |                  |             |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.    OIL CONSERVATION DIVISION   Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved       Date Approved     Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved  |   |  |                 |           |            |                       |                                |              |                                       |                  |             |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.    OIL CONSERVATION DIVISION   Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved       Date Approved     Date Approved       Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved     Date Approved  | VI. OPERATOR CERTIFICA  | ATE OF   | COMP            | LIAN      | CE         |                       |                                |              |                                       |                  |             |  |
| Signature  George Mullen Reg. Affairs Specialist  Printed Name  Date Approved  By SIGNAL SERRY SEXTON  BY SIGNAL SERRY SEXTON  Title  Title  | I hereby certify that the rules and regulations of the Oil Conservation   |  |                 |           |            |                       | OIL CON                        | SERV         | MON                                   | DIVISIO          | IN          |  |
| Signature  George Mullen Reg. Affairs Specialist  Printed Name  Date Approved  By OSIGNAL STANKE BY ISERY SEXTON  Title  Title  Title  | Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief |  |                 |           |            |                       |                                |              | 11 19 0                               | 6 3000           |             |  |
| Signature  George Mullen Reg. Affairs Specialist  Printed Name  By OBIGINAL SERVING SEXTON  BIGURAL SERVING SEXTON  Title  Title   | is the and compage to the best of my knowledge and belief.  |  |                 |           |            | Date                  | Approved                       | d            | THE V                                 | <u> 3 1333 </u>  |             |  |
| George Mullen Reg. Affairs Specialist Printed Name Title Title   | Deorge Mulle  |  |                 |           |            |                       | 1 15                           |              |                                       |                  |             |  |
| George Mullen Reg. Affairs Specialist Printed Name Title Title   | Simanum   | y y Vujo   |                 |           |            | Rv                    | LAUNOMEG                       | SANTAN E.    | y Jersy Si                            | EXTON            |             |  |
| Printed Name Title Title   |   |  |                 |           |            | 11                    |                                |              |                                       |                  |             |  |
| 4-20-02 /212127 FORE   | Printed Name Title  |  |                 |           |            | Title                 |                                |              |                                       |                  |             |  |
|  | 4-28-93   | (7   |                 |           |            | H TRIE.               |                                |              | <u>_</u>                              |                  | <del></del> |  |
| Date Telephone No.   | Date  |  | Telep           | ohone No  | ).         |                       |                                |              | · · · · · · · · · · · · · · · · · · · |                  |             |  |

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.