

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

OPERATOR NAME AND ADDRESS <b>RAY WESTALL</b> <b>P.O. BOX 4</b> <b>LOCO HILLS, NM 88255</b>		THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.	OGRID NUMBER <b>018862</b>
			REASON FOR FILING CODE <b>NW</b>
API NUMBER <i>025</i> <b>30-015-33309</b>	POOL NAME <b>CRAZY HORSE DELAWARE</b>		POOL CODE <b>13390</b>
PROPERTY CODE <b>16695</b>	PROPERTY NAME <b>PALADIN FEDERAL</b>		WELL NUMBER <b>004</b>

II. SURFACE LOCATION

UL OR LOT NO. <b>B</b>	SECTION <b>19</b>	TOWNSHIP <b>19S</b>	RANGE <i>3-3</i> <b>32E</b>	LOT.IDN	FEET FROM THE	NORTH/SOUTH LINE <b>NORTH</b>	FEET FROM THE	EAST/WEST LINE <b>EAST</b>	COUNTY <b>LEA</b>
					<b>330</b>		<b>1980</b>		

BOTTOM HOLE LOCATION

UL OR LOT NO.	SECTION	TOWNSHIP	RANGE	LOT.IDN	FEET FROM THE	NORTH/SOUTH LINE	FEET FROM THE	EAST/WEST LINE	COUNTY
LSE CODE <i>F</i>	PRODUCING METHOD CODE <i>P</i>		GAS CONNECTION DATE <i>7/21/96</i>		C-129 PERMIT NUMBER		C-129 EFFECTIVE DATE		C-129 EXPIRATION DATE

III. OIL AND GAS TRANSPORTERS

TRANSPORTER OGRID	TRANSPORTER NAME AND ADDRESS	POD	O/G	POD ULSTR LOCATION AND DESCRIPTION
<b>005108</b>	<b>SENTINEL</b> <b>1406 NW COUNTY RD</b> <b>HOBBS, NM 88240</b>	<i>2818072</i> <b>O</b>	<b>B</b>	<b>19 19S 32E</b>
<b>005097</b>	<b>CONOCO, INC.</b> <b>P.O. BOX 2157</b> <b>HOUSTON, TX 77252</b>	<i>2818073</i> <b>G</b>	<b>B</b>	<b>19 19S 32E</b>

IV. PRODUCED WATER

POD <b>2815922</b>	POD ULSTR LOCATION AND DESCRIPTION <b>B 19 19S 32E</b>
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V. WELL COMPLETION DATA

SPUD DATE <b>6/3/96</b>	READY DATE <b>07/08/96</b>	TD <b>7858</b>	PBTD <b>7847</b>	PERFORATIONS <b>7398-7504</b>
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET	SACKS CEMENT
<b>17 1/2</b>	<b>13 3/8</b>		<b>496</b>	<b>500</b>
<b>12 3/4</b>	<b>8 5/8</b>		<b>2938</b>	<b>1000</b>
<b>7 7/8</b>	<b>5 1/2</b>		<b>7847</b>	<b>1285</b>

V. WELL TEST DATA

DATE NEW OIL <b>7/21/96</b>	GAS DELIVERY DATE <b>7/21/96</b>	TEST DATE <b>8/12/96</b>	TEST LENGTH <b>24 HRS</b>	TBG PRESSURE <b>30#</b>	CSG PRESSURE <b>30#</b>
CHOKE SIZE <b>1"</b>	OIL <b>18</b>	WATER <b>25</b>	GAS <b>36</b>	AOF	TEST METHOD <b>PUMP</b>

I hereby certify that the rules 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: <i>Susan Parker</i> Printed name: <b>SUSAN PARKER</b> Title: <b>PRODUCTION CLERK</b> Date: <b>10/25/96</b> Phone: <b>(505) 677-2370</b>		OIL CONSERVATION DIVISION  Approved by: _____ Title: _____ Approval Date: <b>OCT 30 1996</b>	
If this is a change of operator fill in the OGRID number and name of the previous operator			
Previous Operator Signature		Printed Name	Title Date

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