

|                  |            |
|------------------|------------|
| SANTA FE         |            |
| FILE             |            |
| U.S.G.S.         |            |
| LAND OFFICE      |            |
| TRANSPORTER      | OIL<br>GAS |
| OPERATOR         |            |
| PRORATION OFFICE |            |

NEW MEXICO OIL CONSERVATION  
REQUEST FOR ALLOW  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

I. Operator  
Operator Amegzko Production Company  
Address P.O. Box 9317, Fort Worth, Texas 76107  
Reason(s) for filing (Check proper box)  
New Well ☐ Change in Transporter of: Oil ☐ Dry Gas ☐  
Recompletion ☐ Casinghead Gas ☐ Condensate ☐  
Change in Ownership ☒ Other (Please explain) Placed into Texas Yates Unit effective January 1, 1971-Former lease name was Forest Federal-now Tr. No.10

If change of ownership give name and address of previous owner Reserve Oil & Gas Company, First Savings Bldg., Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE

|                                                                                                                                                                                                                   |                      |                                                                   |                                                       |                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-------------------------------------------------------------------|-------------------------------------------------------|-----------------------------|
| Lease Name<br><u>Texas Yates Unit Tr. 10</u>                                                                                                                                                                      | Well No.<br><u>1</u> | Pool Name, Including Formation<br><u>Texas Yates Seven Rivers</u> | Kind of Lease<br>State, Federal or Fee <u>Federal</u> | Lease No.<br><u>NY-0435</u> |
| Location<br>Unit Letter <u>H</u> <u>1650</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>East</u><br>Line of Section <u>14</u> Township <u>20S</u> Range <u>33E</u> , NMPM, <u>16S</u> County |                      |                                                                   |                                                       |                             |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|                                                                                                                                                                |                                                                                                                   |                   |                    |                    |                                         |      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------|--------------------|--------------------|-----------------------------------------|------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/><br><u>Forest-New Mexico Pipe Line Company</u> | Address (Give address to which approved copy of this form is to be sent)<br><u>Box 1510, Midland, Texas 79701</u> |                   |                    |                    |                                         |      |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/><br><u>None</u>                                   | Address (Give address to which approved copy of this form is to be sent)                                          |                   |                    |                    |                                         |      |
| If well produces oil or liquids, give location of tanks.                                                                                                       | Unit<br><u>H</u>                                                                                                  | Sec.<br><u>14</u> | Twp.<br><u>20S</u> | Rge.<br><u>33E</u> | Is gas actually connected?<br><u>No</u> | When |

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

IV. COMPLETION DATA

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

M. P. Nelson  
M.P. Nelson (Signature)  
District Superintendent  
(Title)  
January 15, 1971  
(Date)

OIL CONSERVATION COMMISSION  
APPROVED JAN 15 1971, 19  
BY [Signature]  
TITLE SUPERVISOR DISTRICT

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 tests taken on the well in accordance with RULE 111.

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.