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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104 REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 Effective 1-1-65 AUTHORIZATION TO TRANSPORT OF AND NATURAL GAS PRORATION OFFICE Tamarack Petroleum Company, Inc. 413 First Savings & Loan Building, Midland, Texas 79701 Reason(s) for filing (Check proper box) Other (Please explain) This change of operator was effective Change in Transporter of: Dry Gas Recompletion OH June 1, 1967. Change in Ownership X Casinghead Gas Condensate If change of ownership give name and address of previous owner ____ Trainer Corporation, P. O. Box 1100, Hobbs, New Mexico II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Fee 2 Lowe ?carl Queen State, Federal or Fee Location F 1650 West 2331.7 North eet From The 3 29-S 35-E Lea Line of Section Township Range NMPM. III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent) Shell Pipe Line Corporation Box 1910, Midland, Texas Name of Authorized Transporter of Casinghead Gas 🛣 Address (Give address to which approved copy of this form is to be sent) or Dry Gas Warren Petroleum Coropration Box 1589, Tulsa, Oklahoma Is gas actually connected? If well produces oil or liquids, give location of tanks. F 20-S 35-E 3 Yes February 24, 1961 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Plug Back Same Res'v. Diff. Res'v Designate Type of Completion = (X) 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 SACKS CEMENT DEPTH SET (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) V. TEST DATA AND REQUEST FOR ALLOWABLE Date First New Oil Run To Tanks Date of Test Producing Method (Flow, pump, gas lift, etc.) Choke Size Length of Test Tubing Pressure Casing Pressure Actual Prod. During Test Oil-Bbls. Water - Bbls. Gas - MCF **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Choke Size VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION COMMISSION APPROVED 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. TITLE

Tamarack Pe	trbleum Comp	pany, Inc	•
By:	Livit Col	U	
	(Signature)		
Manag	er		
	(Title)		

June 12, 1967

(Date)

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.