| NO. OF COPIES RECE | | |
|------------------------------------|-----|--|
| DISTRIBUTIO | | |
| SANTA FE FILE U.S.G.S. LAND OFFICE | | |
| | | |
| | | |
| | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |
| | | |

NEW MEXICO OIL CONTERVATION COMMISSION

Form C-104

| | ANTA FE | | OR ALLOWABLE AND | Supersedes Old C-104 and C-110 Effective 1-1-65 |
|-------------------------------|---|--|---|--|
| U | .s.g.s. | AUTHORIZATION TO TRAN | SPORT OIL AND NATURAL GA | S |
| | AND OFFICE RANSPORTER OIL | | | |
| _ | GAS | | | |
| _ | PRORATION OFFICE | | | |
| | perator | | | |
| _ | Kenai Oil & Gas Ir | 10. | | |
| A | ddress | Ste. 500, Denver, Colora | ado 80202 | |
| R | eason(s) for filing (Check proper box) | 366. 300, 20 | Office (1 series | ffective 10-1-83. |
| | lew Well | Change in Transporter of: | Change from P & O | Falco to Lantern |
| F | Recompletion | Oil Dry Gas Casinghead Gas Condens | · · · · · · · · · · · · · · · · · | 11011. |
| < | Change in Ownership | Casinghead Gas Condens | | |
| f | change of ownership give name nd address of previous owner | | | |
| n | ESCRIPTION OF WELL AND I | EASE | Kind of Lease | Lease No. |
| | _ease Name | Well No. Pool Name, Including Fo 1 Nadine Drinka | matten | I |
| _ | Terry | | | |
| 1 | Location M 6 | 60 Feet From The West Line | e and 660 Feet From T | The South |
| | Unit Letter M; 6 | reet From the 11000 Ente | | County |
| l | Line of Section 23 Tow | vnship 19S Range | 38E , NMPM, Lea | a |
| - | | AND MARKINAL CA | c | |
| I | DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil | OF OIL AND NATURAL GA | Address (Give address to which approv | ved copy of this form is to be sent) |
| | Lantern Petroleum | Corporation | P. O. Box 2281, Midland | d, Texas 79702 |
| - | Name of Authorized Transporter of Cas | singhead Gas or Dry Gas | Address (Give address to which approx | ved copy of this form is to be sent, |
| | | | Learn getually connected? Who | en |
| ł | If well produces oil or liquids, | Unit Sec. Twp. Rge. M 23 19S 38E | Is gas actually connected? Who | ••• |
| ĺ | give location of tanks. | | li and a number | |
| 1 | f this production is commingled wi | th that from any other lease or pool, | give comminging order number. | D. J. Dutt Post |
| ſ | COMPLETION DATA | Oll Well Gas Well | New Well Workover Deepen | Plug Back Same Restv. Diff. Rest |
| | Designate Type of Completi | on – (X) | Total Depth | P.B.T.D. |
| į | Date Spudded | Date Compl. Ready to Prod. | Total Depth | |
| | Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth |
| | | | | Depth Casing Shoe |
| | Perforations | | | |
| | | TUBING, CASING, AN | ID CEMENTING RECORD | |
| | HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | HOLE 3.22 | | | |
| | | | | |
| | | | | |
| | | Tone must be | after recovery of total volume of load of | il and must be equal to or exceed top al |
| ١. | TEST DATA AND REQUEST | FOR ALLOWABLE able for this c | denth or be for full 44 nours) | |
| | OIL WELL Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas | 11,11, 61017 |
| | | | Casing Pressure | Choke Size |
| | Length of Test | Tubing Pressure | Cashing 1 1000 min | |
| | | Oil-Bbls. | Water-Bbis. | Gas-MCF |
| | Actual Prod. During Test | J | | |
| | | | | |
| | GAS WELL Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| | Actual Flod. 1001-Mol/5 | | 451-4-1 | Choke Size |
| | Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Chora sina |
| | | | OH CONSERV | VATION COMMISSION |
| VI. CERTIFICATE OF COMPLIANCE | | OIL CONSER | 1003 | |
| | | | APPROVED SEP 26 | 1303 |
| | I hereby certify that the rules ar | nd regulations of the Oil Conservation d with and that the information give the heat of my knowledge and belie | en | |
| | above is true and complete to | the best of my knowledge and belie | ef. BY ORIGINAL SIGNED BY | |
| | | | SISINICI I SUL | |

| Small M. | Que, | | | |
|--------------------|------|--|--|--|
| (Signature) | | | | |
| Production Manager | | | | |

(Title)

September 21, 1983

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.

This form is to be filed in compliance with RULE 1104.

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.

SEP 26 1983

and the second of the second o