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

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1.1.89 e Instructions at Bottom of Page

OIL CONSERVATION DIVISION

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 P.O. Box 2088 Santa Fe, New Mexico 87504-2088 DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. Harkey Energy, Inc. Address P.O. Box 1975 Monahans, Texas 79756 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Dry Gas Effective 7-1-92 X Change in Operator Casinghead Gas Condensate If change of operator give name and address of previous operator Saba Energy, Inc. - 4500 W. Illinois #205 - Midland, TX. 79703 II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. | Pool Name, Including Formation Kind of Lease Lease No. Howse A House San Andres Fee Location 1980 Feet From The South Line and _ 660 East Feet From The ___ 11 Township 20S 38E Range Lea , NMPM. County 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) Pride Pipeline Company P.O. Drawer 2948 - Midland, Texas 79702 Name of Authorized Transporter of Casinghead Gas XXX or Dry Gas Address (Give address to which approved copy of this form is to be sent) Sid Richardson Carbon & Gasoline Co <u> 201 Main St. - Ft.</u> Unit F Worth, Texas 76102 If well produces oil or liquids, Twp. 20S Rge. 38E Is gas actually connected? Yes When? give location of tanks. 12 3-11-57 If this production is commingled with that from any other lease or pool, give commingling order number: PLC-13 IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen | Plug Back | Same Res'v Designate Type of Completion - (X) Diff Res'v 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 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 Actual Prod. During Test Oil - Bbls. Water - Bols. 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 OIL CONSERVATION DIVISION 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. AUG 0 3 '92 Date Approved ____ Wendell By ORIGINAL SIGNED BY JERRY SEXTON Signature Wendell Harkey DISTRIGT I SUPPRIVISOR President Printed Name Title_ 1992 July 30, (915)943-4798

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

- 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.

Telephone No.

- 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.