STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

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|-------------------|------|---|--|
| DISTRIBUTION | | | |
| SANTA PE | | | |
| FILE | | | |
| U.S.G.S. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | GAB | | |
| OPERATOR | | | |
| | | 1 | |

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE

| OPERATOR AN | | | |
|---|--|--|--|
| PROBATION OFFICE AUTHORIZATION TO TRANSP | ORT OIL AND NATURAL GAS | | |
| I. | | | |
| Operator | | | |
| Marks & Garner Production Company | | | |
| Address | | | |
| c/o Oil Reports & Gas Services, Inc., Box 755, | . Hobbs. NM 88241 | | |
| Reason(s) for filing (Check proper box) | Other (Please explain) | | |
| , | Change in Transporter of: | | |
| | - | | |
| I Necessition | ndensate | | |
| Change in Ownership Casinghead Gas Col | ingenose - | | |
| If change of ownership give name and address of previous owner | | | |
| II. DESCRIPTION OF WELL AND LEASE | No. of Lease No. | | |
| Lease Name Well No. Pool Name, including Fo | | | |
| Kaiser State 5 Wilson Yates-S | Seven Rivers State B-6807 | | |
| Location | | | |
| Unit Letter J : 1980 Feet From The South Line | e and 1980 Feet From The East | | |
| Unit Letter 3 Feet From The Boder Line | | | |
| Line of Section 13 Township 21S Range | 34E , NMPM, Lea Count | | |
| | 0.10 | | |
| II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) | | | |
| Name of Authorized Transporter of Oil V or Condensate | 1 | | |
| Navajo Refining Company | P.O. Box 159, Artesia, NM 88210 | | |
| Name of Authorized Transporter of Casinghead Gas (Y) or Dry Gas | Address (Give address to which approved copy of this form is to be sent) | | |
| Phillips Petroleum Company 66 Nath Das | Bartlesville, Oklahoma 74003 | | |
| Lintt Sec. Twp. Rge. | Is gas actually connected? When | | |
| if well produces oil or liquids, give location of tanks. L 13 215 34E | Yes 6/10/82 | | |
| If this production is commingled with that from any other lease or pool, | give commingling order number: | | |
| | | | |
| NOTE: Complete Parts IV and V on reverse side if necessary. | | | |
| | OIL CONSERVATION DIVISION | | |
| VI. CERTIFICATE OF COMPLIANCE | MINES 4 1000 | | |
| I hereby certify that the rules and regulations of the Oil Conservation Division have | APPROVED | | |
| been complied with and that the information given is true and complete to the best of | | | |
| my knowledge and belief. | BYORIGINAL SIGNED BY JERRY SEXTON | | |
| | DISTRICT ! SUPERVISOR | | |
| | TITLE | | |
| 11 | This form is to be filed in compliance with RULE 1104. | | |
| Monish Jeles | If this is a request for allowable for a newly drilled or deepe well, this form must be accompanied by a tabulation of the devia | | |
| (Signature) | tests taken on the well in accordance with RULE 111. | | |
| Agent | All sections of this form must be filled out completely for allow | | |
| (Title) | able on new and recompleted wells. | | |
| June 10, 1986 | Fill out only Sections I, II, III, and VI for changes of own | | |
| (Date) | well name or number, or transporter, or other such change of condition. | | |