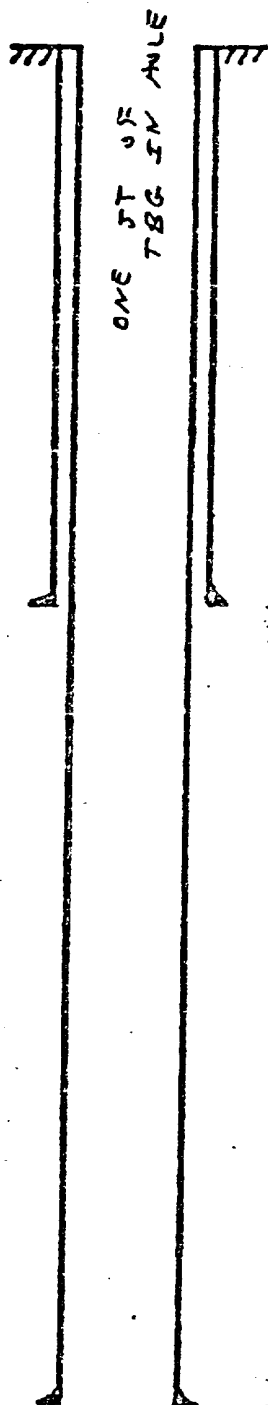


FIELD <b>PRINKARD</b>	OPERATOR <b>SUMMIT ENERGY INC</b>	DATE <b>5-7-76</b>
LEASE <b>GULF B STATE</b>	WELL No <b>1</b>	LOCATION <b>UNIT F 36-22-37</b>



8<sup>5</sup>/<sub>8</sub> " casing set at 1242 ' with 400 sx of Class C cement  
Hole size 12<sup>1</sup>/<sub>2</sub> "      Circulated cement

5<sup>1</sup>/<sub>2</sub> " casing set at 6194 ' with 300 sx of Class C cement  
Total Depth 6200 ' Hole size 7<sup>7</sup>/<sub>8</sub> "  
TOB of Cement Behind 5<sup>1</sup>/<sub>2</sub>      2300' from  
surface.

COPIES RECEIVED	
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

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

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

Operator <u>Summit Energy, Inc.</u>	
Address <u>112 N. First Street, Artesia, New Mexico 88210</u>	
Reason(s) for filing (Check proper box)	
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Recompletion <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Other (Please explain) <u>X Change of Operating Name</u>

If change of ownership give name and address of previous owner: Change of operating name to be effective August 1, 1970

operator <u>Western Oil Fields, Inc.</u>	
DESCRIPTION OF WELL AND LEASE	
Lease Name <u>Gulf B State</u>	Well No. <u>1</u> Pool Name, including Formation <u>Tubb-Blinbry</u>
Kind of Lease <u>State, Federal or Fee State</u>	
Lease No.	
Location	
Unit Letter <u>F</u>	<u>1980</u> Feet From The <u>North</u> Line and <u>2310</u> Feet From The <u>West</u>
Line of Section <u>36</u>	Township <u>22S</u> Range <u>37E</u> , NMPM, <u>Lea</u> County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <u>Permian Corporation</u> <u>Midland, Texas</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) <u>Warren Petroleum Co.</u> <u>Eunice, New Mex.</u>
If well produces oil or liquids, give location of tanks.	Unit <u>A</u> Sec. <u>36</u> Twp. <u>22</u> Rge. <u>37</u> Is gas actually connected? <u>No</u> When

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

COMPLETION DATA	
Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation
Perforations	Top Oil/Gas Pay
	Tubing Depth
	Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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

I. 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.

Paul White  
(Signature)  
Vice-President Production  
(Title)  
August 17, 1970  
(Date)

OIL CONSERVATION COMMISSION	
APPROVED	_____, 19____
BY	<u>[Signature]</u>
TITLE	_____ <u>Secretary</u>

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.