~ 4 14	BTATE OF NEW MEXICO			and -		Form C-1 Revised		
-140		OIL CONSERV/	ATION	DIVISIO	И			
	(1161 M IB UT ION	P. O. BC		00 07501				
	F 11, E	SANTA FE, NEV	W MEXI	CO 87501				
	TRANSPORTER OIL	REQUEST FO	R ALLOW	ABLE				
	OPENATOR	AUTHORIZATION TO TRANS		L AND NATU	IRAL GAS			
1.	Operator		· ··	<u></u>			<u></u>	
	Apache Corporatio	n						
	Address 7666 East 61st. 5	00 Triad Center, Tul:	a a b	klahoma	74133-	1201		
	Reason(s) for filing (Check proper box,		<u>5a</u> 0	Other (Pleas	the second s	1201		
	New Well	Change in Transporter of:	•					
	Recompletion	Oil Dry Go Casinghead Gas Conde	nagte X	 Fffo	ctive 12	/1/86		
						/ 1/ 00		
	If change of ownership give name and address of previous owner							
11	DESCRIPTION OF WELL AND	FASE						
	Leose Nome	Well No. Pool Name, Including F			Kind of Leas		Lease	
	Supron 14 Fed. Co	mm. 1 Antelope Rid	age -	Morrow	State, Federa	N or Foo Federal	!	
		980 Feet From The West Lir	ne and	1980	Feet From "	The South	•	
	14	1 20 2			Tee		Cour	
	Line of Section T. A	mship 235 Range 34		, NMPL			Cour	
п.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	1S	16 in address	to which appro	und convolthis form is	to be senti	
	Nome of Authorized Transporter of Cil Koch Services Inc		1			approved copy of this form is to be sent) eckinridge, Tx. 76024		
	Name of Authorized Transporter of Casinghead Gas or Dry Gas 🔀			(Give address	to which appro	ved copy of this form is	to be sentj	
	El Paso Natural G	Unit Sec. Twp. Rge.	1	BOX 149		so, Tx. 799	78	
	If well produces oil or liquids, give location of tanks.	K 14 23S 34E		es	•	12/12/80		
	If this production is commingled wit	h that from any other lease or pool,	give com	mingling orde	r number:			
	COMPLETION DATA	Oil Well Gas Well	New Well		Deepen	Plug Back Same Re	s'v. Diff. Re	
	Designate Type of Completio		.		t			
	Date Spudded	Date Compl. fleady to Prod.	Total De	pth		P.B.T.D.		
	Elevations (DF, RKB, RT, GR, esc.)	Name of Producing Formation	Top Oil/	Gas Pay		Tubing Depth		
		I	<u> </u>			Depth Casing Shoe		
	Periorations							
		TUBING, CASING, ANI	DCEMEN					
	HOLE SIZE	CASING & TUBING SIZE		DEPTH S	ET	SACKS CE		
-								
						+		
	TEST DATA AND REQUEST F(RAITOWABLE (Test must be a	fer recove	ry of total volu	ume of load oil	and must be equal to or	exceed top a	
¥.	OIL WELL	able for this de	epth or be f	or full 24 hour	s) w, pump, gas li			
	Date First New Oil Run To Tanks	Date of Test	Floatein	d Weinog It to	<i>., pump</i> , s us •	,,,,		
	Length of Tuet	Tubing Pressure	Casing P	jessuo		Choke Size		
	Actual Pred. During Test	Oil-Bbla.	Water-Bi	ble.		Gas - MCF		
	Keiner Pres. During Teer							
							•	
•	GAS WELL	Length of Test	Bbls. Co	ndensate/MMC	F	Gravity of Condensate	•	
					- (-)	Choke Size		
	Testing Method (pitol, back pr.)	Tubing Pressure (Shut-in)	Cailing P	,iessme (Ppnf	-19 }	Chore Size		
л.	CERTIFICATE OF COMPLIANC	се СЕ	1	DIL C	ONSERVA	TION DIVISION		
			ADOD	OVED	FFR17	1987	. 19	
	I hereby certify that the rules and r Division have been complied with	and that the information siven				RRY SEXTON	• • • • • • • • • • • • • • • • • • • •	
	above is true and complete to the	best of my knowledge and belief.	11	DIST	RICT I SUPER	VISOR		
	· 0 0		11	: 			···	
			T	his form is t	o be filed in	compliance with RUL wable for a newly dril	E 1104,	
•	ISigna	twe)	11	his form mus	the accompe	inied by a tabulation rdance with RULK 11	of the devi-	
~	Production Clerk			11 sections o	f this form mu	ast be filled out comp	letely for a	
•	(T u	le j	able o	n new end re	completed w	elie. 1 111 and VI for chi	Incua of ou	
	2/10/87 (De	ie)	ll well n	anie or numbe	or, or transpor	ter, or other such chan it he filed for each j	fie of course	
				eparate Form sted wells:	. C-104 mus	for the for secul		

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EN	STATE OF NEW MEXICO HERGY AND MINIFRALS DEPARTMENT	OIL CONSERV	ATION DIVILION	Form C-104 Revised 10-1-78
	CISTNIGUTION SANTA 77 FILE		ох 2088 W MEXICO 87501	
	U.S.U.S.	REQUEST FO	OR ALLOWABLE	
	TRANSPORTER OAL		AND SPORT OIL AND NATURAL GAS	
t	OPERATION PROBATION OPPICE			
	Apache Corporatio	on		
	7666 East 61st,	500 Triad Center, Tul	sa Oklahoma 74133-1	201
	Reoson(s) for filing (Check proper bo New Woll	Change in Transporter of:	Other (Please explain)	······
	Recompletion			
	Change in Ownership	Casingheod Gas Conde	ensole X Effective 12	/1/86
	If change of ownership give name and address of previous owner			·····
11	. DESCRIPTION OF WELL AND			
	Supron 14 Fed. Co	omm 1 Antelope Ri		
	Location	·		······································
		980 Feel From The West LI	ine and <u>1980</u> Feet From	The South
	Line of Section T.	mahip 23S Range 3	4Е , ммрм, Le	a Cour
II	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS	
	Norme of Authorized Transporter of Co Koch Services Inc		Address (Give address to which appr	· · · · ·
	Name of Authorized Transporter of Co El Paso Natural (singhead Gas or Dry Gas X	P.O. Box 1558, Brec Address (Give address to which appr	
		Jas Company	P.O. Box 1492 El Pas	50 Tx. 77002
	If well produces oil or liquids, give location of tanks.	K 14 23S 34E		11/1/80
IV.	If this production is commingled w. COMPLETION DATA	ith that from any other lease or pool,	give commingling order number:	¹ Plug Back ¹ Same Res'v. ¹ Diff. Re
	Designate Type of Completi			
	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, AN	D CEMENTING RECORD	
•.	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
v.	TEST DATA AND REQUEST F		fter recovery of total volume of load oil opth or be for full 24 hours)	and must be equal to or exceed top a
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	iji, etc.]
	Leasth of Test	Tubing Pressure	Casing Pressure	Choke Size
	Length of Tool	I moving i tromagne		
	Actual Prod. During Test	Oll-Bbla.	Water-Bbls.	Gas - MCF
		······································	J	· · · · · · · · · · · · · · · · · · ·
	GAS WELL	Longin of Tost	Bbls. Condensate/MMCF	Gravity of Condensate
				Choke Size
	Tealing Helhod (pitol, back pr.)	Tubing Pressure (Shnt-in)	Cosing Pressure (fibut-in)	
ч.	CERTIFICATE OF COMPLIAN	CE		*
	I hereby certify that the rules and t	regulations of the Oil Conservation	APPROVED FEB17	1987 19
	Division have been complied with above is true and complete to the	and that the information given beat of my knowledge and belief.	ORIGINAL SIGNED BY JER	RY SEXTON
	Λ Λ			compliance with RULE 1104.
		res	If this is a request for allo	wable for a newly drilled or deep:
•	Production Clerk	sture)	tests taken on the well in acco	
-	(Til	ile j	able on new and recompleted w	
	2/10/87	(ie)	Fill out only Sections 1, 1 well name or number, or transport	1, 111, and VI for changes of ov- ter, or other such change of condi-
				it be filed for each pool in mul-



-	BTATE OF NEW MEXICO FRGY AND MINERALS DEPARTMENT		-	÷.	Form C-10 Revised 1	
EN		OIL CONSERVA		N.		
	DISTRIBUTION	P. O. BO				
		SANTA FE, NEV	V MEXICO 87501			
	U.S.O.B.					
	LAND DFFICE	REQUEST FOR	R ALLOWABLE			
	TRANSPORTER OAS					
-	OPERATOR	AUTHORIZATION TO TRANSI	PURT OIL AND NATU	IRAL GAS		
1.	Operation	<u></u>				
	Apache Corporat	ion				
	Address D. D. Day 1620					
		Houston, TX 77210	Other (Pleas			
	Reason(s) for filing (Check proper box) Change in Transporter of:	Unter Ir leas	e expining		
	New Well		change d	of operato	r <u>-</u> effective 3	/9/84
	Change in Ownership XX	Casinghead Gas Conder	hsate			
		Natomas North Ame	erica, Inc.			
	If change of ownership give name and address of previous owner	1 West Third Street,	Suite 900, Tuls	sa, OK 74	103	
				-		
П.	DESCRIPTION OF WELL AND	Well No. Pool Name, Including F	ormation	Kind of Lease	•	Lease No.
	Supron "14" Federal Com			State, Federa	lorFoo Federal	
	Location	<u>.</u>		<u> </u>		•••••••••••
	Unit Letter NK : 19	80 Feet From The West Lin	e and 1980	Feet From 7	rheSouth	·
			_			
	Line of Section 14 T.	mahip 235 Range	34E , NMPI	, Lea		County
			c	:		
ш.	DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	Address (Give address	to which approv	ved copy of this form is t	o be sentj
	UPG, Inc.		P. 0. Box	2248. Andr	ews, TX 79714	
	Name of Authorized Transporter of Cas	singhead Gas of Dry Gas 🔀	Address (Give address	to which approv	ved copy of this form is t	o be sent)
	El Paso Natural Gas Com		Box 1492,	the second s		
	If well produces oil or liquids,	Unit Sec. Twp. Rge. N 14 23S 34E	Is gas octually connect	ied? Who	n 11/11/80	
	give location of tanks.		yes			
	If this production is commingled with	th that from any other lease or pool,	give commingling orde	r number:		
IV.	COMPLETION DATA	Oii Well Gas Well	New Well Workover	Deepen	Plug Back Same Res	v. Diff. Res'
	Designate Type of Completio	pn = (X)		•	i i	
	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	
			1		Depth Casing Shoe	<u></u>
	Perforations					
		TUBING, CASING, AND	CEMENTING RECO	RD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTHS	ET	SACKS CEN	IENT
		OR ALLOWARIE (Test put he a	fier recovery of total vol	ume of load oil	and must be equal to or e	exceed top allo
ν.	TEST DATA AND REQUEST F	able for this de	pth or be for full 24 hour	*)		
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	w, pump, gas li	ft, etc.)	
					Choke Size	
	Length of Test	Tubing Pressure	Casing Pressure			
		Oil-Bhle.	Water-Bbls.		Gas - MCF	
	Actual Prod. During Test					
	L	<u></u>			·	
	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMC	CF	Gravity of Condensate	
		Tubing Pressure (Shut-in)	Cosing Pressure (Shw	t-1p]	Choke Size	
	Testing Method (pitot, back pr.)	I UDING PRODUCE (SURC-IN)	Cara	,		
				ONSERVA	FION DIVISION	,
¥I.	CERTIFICATE OF COMPLIAN	. E.	11			
	I hereby certify that the rules and regulations of the Oll Conservation		APPROVED	APR 4	<u>1984</u> .	19
	Division Mays been complied with	and that the information given	OR!	SINAL SIGNE	D BY JERRY SEXTON	
	above is the and complete to the	best of my knowledge and belief.		DISTRICT	SUPERAISON	
			TITLE			····
	5/1/	•	This form is t	o te filed in	compliance with RUL	E 1104.
	To. C. Lu	1 Barbara A. Ellis			wable for a newly drill inled by a tabulation of	ed or deepen
•	(Sign	ature)	I tests taken on the	well in acco	rdance with HULL II	**
	Supervisor		All sections of	f this form mu	ist be filled out compl	etely for allo
	3/13/84	14 4 j	able on new and r	diations 1 1	1 111 and VI for cha	nges of own
	and the second	D(*)	I well name or numb	er, or transpor	ler of other such chan	
		-	Separate For	ns C-104 mus	it be filed for each p	ool in multip
			completed wells.			

RECEIVED MAR 1 9 1984 O.C.D. HOBES OFFICE 1999 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -

CNIC	STATE OF NEVY MEAILU RGY AND MINERALS DEPARTMENT		••		Form C-104 Revised 10-1-78
2145	**. ** 1+*165 *******		ATION DIVISI	1	
	DISTRIBUTION		OX 2088 W MEXICO 87501		
	FILE	SANTA / E, NE			
	LAND DFFICE				
	IMANSPORTER OIL		DR ALLOWABLE AND		
	OPERATOR	AUTHORIZATION TO TRANS	SPORT OIL AND NATUR	AL GAS	1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -
I.	Operator				
	Apache Corpora	ition			
	P. 0. Box 4628	, Houston, TX 77210			
	Reason(s) for filing (Check proper bo)z)	Other (Please e	zplainj	
	New Well	Change in Transporter of:			
	Recompletion Change in Ownership XX	Oil Dry G Casinghead Gas Conde		operator - et	fective 3/9/84
		Natomas North Ameri	ca Inc	·····	
	If change of ownership give name and address of previous owner	1 West Third Street, Su		<u>0K 74103</u>	
					•
II.	DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	ormation K	ind of Lease	Lease No.
	Supron "14" Federal C	omm 1 Antelope Ridge	s - Morrow s	tate, Federal or Fee	Federal
	Location N 10	80 Feet From The West Li	1090	c	outh
	Unit Letter ; ; ;	80 Feet From The West Lin	ne and <u>1980</u>	Feet From The	outin
	Line of Section 14 T.	waship 23S Range	34Е , ммрм,	Lea	County
	DECICI LETICN OF TRANSPOR	TER OF OUL AND NATURAL C	45		
ц.	Name of Authorized Transporter of Of	TER OF OIL AND NATURAL GA		which approved copy	of this form is to be sent)
	UPG, Inc.		P. 0. Box 2248		
	Name of Authorized Transporter of Co			•	of this form is to be sent)
	El Paso Natural Gas C	Unit Sec. Twp. Rge.	Box 1492, E1 I		02
	give location of tanks.	N 14 23S 34E	yes	! 12/1	2/80
		ith that from any other lease or pool,	give commingling order n	umber:	
v. 	COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Plug E	Back Same Restv. Diff. Restv
	Designate Type of Completi				
	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	g Depth
			<u> </u>	Death	Casing Shoe
	Perforations			Depth	Casing Supe
ł		TUBING, CASING, AND	D CEMENTING RECORD	I	
I	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT
ł					
ł					
Ī		1			
	TEST DATA AND REQUEST F		fier recovery of ioial volume opth or be for full 24 hours)	of load oil and must	be equal to or exceed top allow
Ī	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, p	ump, gas lift, etc.)	
				Choke	<u> </u>
	Length of Test	Tubing Pressure	Casing Pressure		
ł	Actual Prod. During Test	Oil-Bhie.	Water+Bbls.	Gas - N	ICF
L			l		
	GAS WELL				
T	Actual Prod. Test-MCF/D	Length of Teet	Bbls. Condensate/MMCF	Gravit	y of Condensate
L					
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-11	Chore	2114
ــ ۱. (CERTIFICATE OF COMPLIAN	CE		ISERVATION D	IVISION
				<u>PR 4 198</u>	
I	hereby certify that the rules and a hivision have been complied with	regulations of the Oil Conservation		/ / L	-
	bove is true and complete to the	best of my knowledge and belief.	BY ORIGINALS	IGNED BY JERRY	R
	1 1	•.	TITLE		· · ·
(Aldu.		Thir form is to be	filed in complian	ace with RULE 1104.
-	p. a. x. m	1 Barbara A. Ellis	wall this form must be	accompanied by	a newly drilled or despens a tabulation of the deviation
	autor Supervisor	oturej	tests taken on the well	1 in accordance w	ATT RULE 111.
	(Tu	ile)	able on new and recon	plated wells.	led out completely for allow
-	3/13/84		Fill out only Sec	tions 1, 11, 111, an r transporter, or oth	nd VI for changes of ownemer such change of condition
	(Da	ιτ <i>γ</i>	Separate Forma C		ed for each pool in multip
		ł	completed wells.		

RECEIVED MAR 1 9 1984 HOBBS OFFICE

			<u> </u>	
F	DISTRIBUTION			Form C+104 Superaedea Old C+104 and C+110
	FILE U.S.C.S.		FOR ALLOWABLE AND NSPORT OIL AND NATURAL G	Ellective 1-1-65
	IRANSPORTER DIL GAS OPETINTOR			
	PROPATION OFFICE			
-	Natomas North America,	, Inc.		
ļ	1 West Third Street, S Resson(s) for filing (Check proper box)	Suite 900, Tulsa, Oklahoma	a 74103 Other (Please explain)	
	New Well	Change in Transporter of:		
	Recompletion Change in Ownership	Cil Dry Gas Casinghead Gas Condens	E I	33
	If change of ownership give name and address of previous owner			
I. j	DESCRIPTION OF WELL AND I	EASE Vell No. Puol Name, Including Fo		Leose No.
-	Supron "14" Federal Comm	Antelope Ridge		er Fee Federal
			4E , NMPM, Lea	County
l				
ו.] [Nome of Authorized Transporter of Oll	C OF OIL AND NATURAL GA	Address (Give address to which approv	
ļ	UPG, Inc. Nome of Authorized Transporter of Cas.	ingriead Gas 📄 or Dry Gas 🔀	P.O. Box 2248, Andrews, Address (Give address to which approv	d copy of this form is to be sent)
_	_El Paso Natural Gas Com	ipany Unit Sec. Twp. Pge.	Is gas actually connected? Whe	n
		N 14 23S 34E	Yes	11/11/80
	If this production is commingled with COMPLETION DATA	h that from any other lease or pool, g		Plug Back ¹ Same Res'v. ¹ Diff. Res'v.
	Designate Type of Completion	n - (X)	New Well Workover Deepen	
Ì	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Elevations (DF, RKB, RT, GR, esc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
	Perforations		I	Depth Casing Shoe
∤		TUBING, CASING, AND		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
ł				i
	TEST DATA AND REQUEST FO	able for this de;	ier recovery of total volume of 1000 off pih or be for full 24 hours) Producing Niethod (Flow, pump, gas lif	and must be equal to or exceed top allow-
	Date First New Oll Run To Tanks	Date of Test		Choke Size
	Length of Test	Tubing Pressure	Cosing Presewe	
	Actual Pred. During Test	Oil-Bbla.	Water-Bbis.	Gas+MCF
Į				
[GAS WELL Actual Prod. Tost-MCF/D	Length of Test	Bbls. Condensate/AMCF	Gravity of Condensate
	Testing Weikod (pitot, back pr.)	Tubing Freesure (Ehnt-in)	Cosing Freessure (Shot-in)	Choke Size
1.	CERTIFICATE OF COMPLIANC	E	OIL CONSERVA	1983
	I hereby certify that the rules and ru Commission have been complied w above is true and complete to the	ith and that the information riven i	BY	ED BY EDDIE SEAY
	Λ Λ	\bigcap	TITLE	INSPECTOR
	Craix (A	nrad	This form is to be filed in a If this is a request for allow	while for a newly drilled or deepene
-	Craig Conrad (Signa		well, this form must be accomps tests taken on the well in accor	dance with RULE 111.
•	Operations Administrato		able on new and recompleted w	1 TH and VI for changes of owne
	September 28, 1983	(e)	U	er, or other such change of conditions to be filed for each pool in multip

	**.		
]		
SANTA FE		ONSERVATION COMMISSION	Form C-104 Superandes ()IJ C-104 and C-110 Ellactiva 1-1-65
FILE	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL G	-
IRANSPORTER OIL	-		
GAS OPETIATOR	-		
PROFATION OFFICE	1		
Natomas North America	, Inc.		
1 West Third Street, S	Suite 900, Tulsa, Oklahoma		
Reason(s) for filing (Check proper box New Wall	Change in Transporter of:	Other (Picase explain)	
Recompletion Change in Ownership	Cil Dry Goi Casinghead Gas 1 Conden		01/83
If change of ownership give name			
and address of previous owner			
DESCRIPTION OF WELL AND Lease Name	LEASE Vell No. Pool Name, Including Fo	ormation Kind of Lease State, Federal	•••••
Supron "14" Federal Con	m 1 Antelope Ridge	- Morrow	Federal
Unit Letter;19	180Feel From TheWestLine	e and <u>1980</u> Feet From T	"he South
Line of Section 14 To	wnship 23S Pange	34E . NMPM, L	ea County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S Address (Give address to which approv	ed copy of this form is to be sent)
UPG, Inc.		P.O. Box 2248, Andrews	. Texas 79714
Nome of Authorized Transporter of Co El Paso Natural Gas Com		Address (Give address to which approv Box 1492, El Paso, Texas	
li well produces oil or liquids, give location of tanks.	Unit Sec. Twp. P.ge.	Is gas actually connected? Whe	
	th that from any other lease or pool,	give commingling order number:	12/12/80
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty, Diff. Resty.
Designate Type of Completin Doie 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
			Depth Casing Shoe
Perforations			
HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be at	1 free recovery of total volume of load ail i	and must be equal to or exceed top allow.
OIL WELL Date First New Oil Run To Tanks	able for this de Date of Test	pih or be for full 24 hours) Producing Method (Flow, pump, gas lif	'ı, elc.)
Length of Test	Tubing Presews	Cosing Pressure	Choke Size
		Water - Bbis.	Gas-MCF
Actual Pred, During Test	Oil-Bbla.		
GAS WELL		-	
Actual Prod. Test-MCF/D	Length of Test	Bbls, Condensate/AMCF	Gravity of Condensate
Traiing kreited (pitot, back pr.)	Tubing Freezwe (Ehnt-in)	Cosing Freesure (Sbut-in)	Choke Size
CERTIFICATE OF COMPLIAN	CE		TION COMMISSION
hereby certify that the rules and	regulations of the Oil Conservation	APPROVED OCT 4	
Commission have been complied	with and that the information given e beat of my knowledge and belief.	BYORIGINAL SIGNE	D BY EDDIE SEAY
	\bigcap	TITLE OIL & G	AS INSPECTOR
(rally (own	B	ALS INSPECTOR compliance with AUL Con- value for a newly drilled or despense
		well, this form must be accomps teats taken on the well in accomp	dance with RULE 111.
-	or inle)	able on new and recompleted we	et be filled out completely for sliovella.
September 29, 1983	ate)	wett name or number, or transport	I, III, and VI for changes of owner er, or other such change of condition the filled for each prol in multip
		Septime Forme C-104 mur	the iting for sach boot in muni-

RECEIVED OCT 3 1983 HOBES CARLE

	NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILS U.S.G.S. LAND OFFICE I RANSPORTER OIL GAS OPERATOP PRORATION OFFICE	REQUEST F	NSERVATION COMMISSION OR ALLOWABLE AND SPORT OIL AND NATURAL G	Form C-104 Supersedes Old C-104 and C-11 Effective 1-1-65 AS
	Operator Natomas North America Actross 1 West Third Street, Keason(s) for Hing (Check proper box) New Well Becompletion Change in O exship If change (ownership give name and address of previous owner		Other (Please explain)	
	DESCRIPTION OF WELL AND L Lease inte Supron "14" Federal Comm Location Unit Letter X : 198	0 Feet From The West Line	- Atoka State, Federal 1980	Lease No. Lot Fee Federal
	DESIGNATION OF TRANSPORT Name of Authorized Transporter of Oil Charter Crude Oil Compan Name of Authorized Transporter of Casi El Paso Natural Gas Compo- ti well produces oil or liquids, give location of tanks.	or Condensate X ny inghead Cas or Dry Gas any Unit Sec. Twp. Ege. N 14 235 34E	Address (orbe address to which apple <u>P.C. Box 5008</u> - Houstor Address (Give address to which approv <u>Box 1492, El Paso, Tex:</u> <u>Is gas actually connected?</u> Which <u>Yes</u> No	n. Texas 77012 Ved copy of this form is to be sent) as 77002
IV.	COMPLETION DATA Designate Type of Completion Date Squaded Elevations (DF, RKB, RT, GR, etc.) Perforations	011 11 11 11 11 11 11 11 11 11 11 11 11	New Well Workover Deepen Total Depth Top Oil/Gas Pay	Plug Back Same Restv. Diff. Restv. P.B.T.D. Tubing Depth Depth Casing Shoe
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V.	TEST DATA AND REQUEST FO OIL WELL Date First New Oil Run To Tanks Length of Teet Actual Prod. During Test	OR ALLOWABLE (Test must be af able for this dej Date of Test Tubing Pressure Oil-Bble.	ter recovery of total volume of load oil pth or be for full 24 hours) Producing Method (Flow, pump, gas l Casing Pressure Water-Bbls.	l and must be equal to or exceed top allow- ift, etc.) Choke Size Gas-MCF
	GAS WELL Actual Prod. Test-MCF/D	Length of Test Tubing Pressure (Shut-in)	Bbls. Condensate/MMCF Casing Pressure (Shut-in)	Gravity of Condensate Choke Size
VI	Commission have been complied v above is true and complete to the UAUX (Sign Operations Administrator	CE regulations of the Oil Conservation with and that the information given to best of my knowledge and belief.	OIL CONSERV APPROVED NOV 5 ORIGINALS BYJERRY S TITLEDISTRICT This form is to be filed in If this is a request for allo well, this form must be accomp texts taken on the well in acc	EXTON 1 SUPR. 1 compliance with RULE 1104. 1 owable for a newly drilled or deepened 2 panied by a tabulation of the deviation 2 ordance with RULE 111. 2 nuat be filled out completely for allow

RECEIVED NOV 4 1982 HOLES Ortice 3 1. 1. 1.

1.	DISTRIBUTION DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE IRANDPORTER OIL GAS OPERATOR PROBATION DISTOR		ONSERVATION COMM FOR ALLOWABLE AND NSPORT OIL AND N		Poim C-104 Supersedes Old Effective 1-1-65	C-104 and C-11
	Natomas North America, Address 1 West Third Street, Su Resson(a) for Filing (Check proper box) New Well Becompletion Change in O syship	uite 900 - Tulsa, Oklah	Other (Please	explain)		
H.	If change c. ownership give name and address of previous owner DESCRIPICION OF WELL AND I Lease Name Supron "14" Federal Comm Location Unit Letter () = 198	Well No. Pool Name, Including Fo	e - Morrow 1980	Kind of Lease State, Føderal or _ Feet From The	Fee Federal	Lease No.
111.	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GA	Address (Give address t	o which approved		•
	Charter Crude Oil Compar Name of Authorized Transporter of Cas El Paso Natural Gas Comp If well produces off or liquids, give location of tanks. If this production is commingled with	any Unit Sec. Twp. Ege. N 14 23S 34E	P.O. Box 5008 Address (Give address t Box 1492, E1 F is gas actually connecte Yes	Paso, Texas d? ^{when} Nov		
	COMPLETION DATA Designate Type of Completio Date Spudiod Elevations (DF, RKB, RT, GR, etc.)	Oll Well Gas Well	New Well Workover	Deepen P	lug Back Same Res' i B.T.D. 'ubing Depth	v. ¹ Diff. Res'v.
	Perforations			E	Pepth Casing Snoe	
	HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	D CEMENTING RECOR		SACKS CEM	ENT
v.	TEST DATA AND REQUEST FC OIL WELL Date First New Oil Run To Tanks	PR ALLOWABLE (Test must be a able for this de Date of Test	fter recovery of total volu pth or be for full 24 hours Producing Method (Flow)		ceed top allow
	Length of Test Actual Prod. During Test	Tubing Pressure Oil-Bbls.	Casing Pressure Water-Bbls.		Choke Size Gas-MCF	
	GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMC	- 0	aravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	-in) (Choke Size	
-	CERTIFICATE OF COMPLIANC I hereby certify that the rules and re Commission have been complied we above is true and complete to the UAUU (Signa Operations Administrator (Titel	egulations of the Oil Conservation ith and that the information given best of my knowledge and belief.	APPROVED BY TITLE This form is to If this is a requ well, this form musi teats taken on the t	NOV 5 DRIGINAL SIGN JERRY SEXT DISTRICT 1 S be filed in com uest for allowab the accompanie well in accordant this form must	ED BY ON UPD pliance with RULE ie for a newly drille d by a tabulation of nce with RULE 111 be filled out comple	19 1104. d or deepener the deviation

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	DISTRIBUTION SANTA FE FILE		CONSERVATION COMMISS N FOR ALLOWABLE	Form C - 104 Supersedes Old C-104 and C+17 Effective 1-1-65
	U.S.G.S.	AUTHORIZATION TO TR	AND ANSPORT OIL AND NATURAL GA	
	LAND OFFICE	-		
	TRANSPORTER GAS			
•	OPERATION OFFICE			
I.	Operator			
	NATOMAS NORTH AMERICA	INC.		
	Suite 900, 1 West Thir	d, Tulsa, Oklahoma 7410)3	
	Reason(s) for filing (Check proper box	;)	Other (Please explain)	
	Recompletion	Change in Transporter of: Cil Dry G	as 🔲	
	Change in Ownership	Casinghead Gas Conde	ensate X	
	If change of ownership give name and address of previous owner			
п.	DESCRIPTION OF WELL AND Leose Name	Well No. Pool Name, Including F		Lease No.
	Supron "14" Federal Com	m 1 Antelope Ridge	e - Morrow State, Federal or	Fee Federal
	- /V	80 Feet From The West 11	ne and <u>1980</u> Feet From The	South
				<u>5000011</u>
	Line of Section 14 To	wnship 23S Range 3	34E , NMPM, Lea	County
II.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS Address (Give address to which approved	convolution form in to be sent
	International Crude Cor		2454 Industrial Blvd. Ab	i
- •	Name of Authorized Transporter of Ca	singhead Gas 🔀 or Dry Gas 🚞	Address (Give address to which approved	copy of this form is to be sent)
	El Paso Natural Gas Com If well produces oil or liquids,	Dany Unit Sec. Twp. P.ge.	Box 1492, El Paso, Texas Is gas actually connected? When	77002
	give location of tanks.	N 14 23S 34E	Yes Nov	ember 12, 1980
	If this production is commingled wi COMPLETION DATA	th that from any other lease or pool,	give commingling order number:	
	Designate Type of Completio	Oil Well Gas Well	New Well Workover Deepen P	lug Back Same Res'v. Diff. Res'v.
	Date Spudded	Date Compl. Ready to Prod.	Total Depth P	.B.T.D.
				alter Death
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!l/Gas Pay T	ubing Depth
1	Perforations		D	epth Casing Shoa
		TUBING, CASING, ANI	CEMENTING RECORD	
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	······································	1		
v .	TEST DATA AND REQUEST FO	DR ALLOWABLE (Test must be a	fter recovery of total volume of load oil and	must be equal to or exceed top allow-
i	OIL WELL Date First New Oil Run To Tanks	able for this de Date of Test	p:h or be for full 24 hours) Producing Method (Flow, pump, gas lift, e	
		<u>-</u>		
	Length of Test	Tubing Pressure	Casing Pressure C	hoke Size
	Actual Pred, During Test	Oil-Bbla.	Water-Bble. G	as-MCF
				U
	GAS WELL	y	······································	
	Actual Prod. Toot-MCF/D	Length of Test	Bble. Condensate/MMCF G	ravity of Condensate
ł	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) Cl	toke Size
1	CERTIFICATE OF COMPLIANC		OIL CONSERVATIO	
1.	CERTIFICATE OF COMPLIANC	<i>.</i> L	APPROVED AUG 2 - 198	
1	hereby certify that the rules and re Commission have been complied w	egulations of the Oil Conservation ith and that the information given		, 19
	bove is true and complete to the		BY ORIGINAL SIGNED BY	
	Λ (Λ)		TITLE JERRY SEXTON	
	(Jack Anto	X	TITLE DISTRICT 1 SUPR. This form is to be filed in comp	pliance with RULE 1104.
~	Craig Conrad (Signa	// (w+)	If this is a request for allowable well, this form must be accompanied tests taken on the well in accordance	e for a newly drilled or deepened by a tabulation of the deviation ca with BULE 111.
	<u>Operations Administrator</u>	-	All sections of this form must b	 filled out completely for allow-
	$f^{(1)}$		Table on new and recompleted wells.	I. and VI for changes of owner,
-	July 28. 1982 (Dat	e)	wells. well name or number, or transporter, o	I. and VI for changes of owner,



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STATE OF NEW MEXICO				Form C-10	-
	OIL CONSERV	ATION DIVISI	ЛС	Revised 1	0-1-78
DISTRIBUTION SANTA PE		0 X 2088 N MEXICO 87501			
- 11 E					
LAND OFFICE	REQUEST FO	R ALLOWABLE			
TRANSPORTER DIL		ND			
PROMATION OFFICE	AUTHORIZATION TO TRANS	PORT OIL AND NATI	JRAL GAS		
Natomas No	orth America, Inc.				
Address					· · · · · · · · · · · · · · · · · · ·
5251 Westh Reason(s) for filing (Check proper bo	neimer, #700, Houston, Ter				
New Well	*/ Change in Transporter of:	Other (Pleas	ie espiainj		
Recompletion					
Change in Ownership	Casinghead Gas Conde	nsote X			
If change of ownership give name and address of previous owner				•	
	1.0.400				
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	ormation	Kind of Lease	•	Lease No.
Supron-Federal Comm "#	Antelope Ridg	ge - Morrow	State, Federa	lor Fee Federal	<u>NM 1503</u>
Location A	980	1980		rheSouth	
Unit Letter K ; 1	980 Feet From The West Lir	e and	Feet From	rhe <u> </u>	<u></u>
Line of Section 14 To	ownship 23S Range	34E , NMP	M. Lea		County
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	IS			
Name of Authorszed Transporter of Ci	ii 📄 or Condensate 🔀	Address (Give address		ved copy of this form is t	o be sent)
Western Crude Oil, In Name of Authorized Transporter of Co		P. O. Box 1142 Address (Give address		<u>Texas 79702</u>	o be sent)
EL Paso Nutural Gas Co					
If well produces oil or liquids,	Unii Sec. Twp. Rge. K 14 23S 34E	Is gas actually connec	ted? Whi	. .	· · · · ·
give location of tanks.	<u></u>	Yes	i	11/12/80	
If this production is commingled w COMPLETION DATA	ith that from any other lease or pool,				
Designate Type of Completi	ion - (X)	New Well Workover	I Deepen I I	Plug Back Same Res	'v. ' Diff. Hea'y I
Date Spudded	Date Compl. Ready to Prod.	Total Depth	ł <u></u>	P.B.T.D.	t
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth	
Lievanona (Dr., KKB, KT, GK, ele.)	•				
Perforations				Depth Casing Shoe	
	TUBING, CASING, ANI	D CEMENTING RECO	RD	<u> </u>	
HOLE SIZE	CASING & TUBING SIZE	DEPTH	SET	SACKS CEM	ENT
······································				· · · · · · · · · · · · · · · · · · ·	
		<u> </u>	·· _·· -	i	
TEST DATA AND REQUEST F		feer recovery of total vol opth or be for full 24 hou		and must be equal to or e	xceed top allow
Date First New Oil Run To Tanks	Date of Test	Producing Method (Flo	w, pump, gas li	(l, elc.)	
Length of Tuel	Tubing Pressure	Casing Pressure		Choke Size	
					·
Actual Prod. During Test	Oil-Bbis,	Water - Bbls.		Gas - MCF	
	<u> </u>			_I	
GAS WELL					
Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MM		Gravity of Condensate	
Teeting Method (pitot, back pr.)	Tubing Procowo (Shut-in)	Casing Pressure (Shu	t-in)	Choke Size	
CERTIFICATE OF COMPLIAN	ICE .	1		ION DIVISION	
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED		<u></u>	19
Division have been complied will above is true and complete to th	h and that the information given e beat of my knowledge and belief.	BY	This And	<u>រ</u> ាក	
		TITLE	<u> </u>		
· De vite 1				compliance with AULE	1104.
trib Illand			west for allow	able for a newly drille nied by a tabulation o	d or deepens
Bob Menefee (Sign	alwe)	tests taken on the	well in accor	dence with RULE 111	•
Administrative Coordina (T	tor South Area	All sections of able on new and r	f this form mu ecompleted we	at be filled out comple lis.	tely for allow
·		Fill out only	Sections 1 II	. III, and VI for char ar, or other auch chang	es of owner of condition
(U	ate)			t be filed for each po	
		remplated wells.		·	-

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JUL 1 3 1981

OIL CONSERVATION DIV. REG

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STATE OF NEW MEXICO			form C-104 Ravised 10-1-78
+(5 Y AND IVIIVETIALE) DET MITTICET	OIL CONSERVA		
	SANTA FE, NEW		
U 8.0.8.		ALLOWARI E	
TRANSPORTER DIL	REQUEST FOR	D	
OPFRATOR PRONATION OFFICE		ORT OIL AND NATURAL GAS	
Natomas North,America,s	Une.		
5251 Westheimer #700, H	Jouston, Texas 77056		
Resson(s) for filing (Check proper box)		Other (Please explain)	
New Well	Oil Dry Gas		
Change in Ownership	Casinghead Gas Condens		<u></u>
If change of ownership give name and address of previous owner		·	-
DESCRIPTION OF WELL AND I	LEASE	mation Kind of Lease	Lease No.
Lease Name 14"	Well No. Pool Name, Including For 1 Antelope Ridge		_
Supron-Federal Comm			south
Unit Letter K : 19	80 Feet From The West Line	and <u>1980</u> Feet From 7	
Line of Section 14 Tow	mehip 23S Range	34Е , ммрм, Lea	County
DESIGNATION OF TRANSPORT	OF OIL AND NATURAL GAS	Addiess (Othe addiese to mitter after	
Western Crude Oil, Inc. Name of Authorized Transporter of Cas		P. O. Box 1142, Midlan Address (Give address to which approv	nd Tx 19102 ved copy of this form is to be sent)
EL Paso Nutural Gas Co.		Is pas actually connected?	
If well produces off or liquids, give focation of tanks.	Unit Sec. Twp. Rge. K 14 23S 34 E	1s gas actually connected? Wh Yes	11/11/80
	th that from any other lease or pool, g		Plug Back Same Res'v. Diff. Res'v.
- Designate Type of Completic	on = (X)	New Well Workover Deepen	Plug Back Sume Nes V. Onit Hot H
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	DEPTH SET	SACKS CEMENT
. TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be a)	lier recovery of total volume of load oil	and must be equal to or exceed top allow
Date First New Oil Bun To Tanks	able for this de Date of Teet	pik or be for full 24 hours) Producing Mathod (Flow, pump, gas l	
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure		
Actual Prod. During Test	Oil-Bbls.	Wgier + Bbls.	Gas•MCF
l		<u></u>	
GAS WELL	Longth of Tost	Bble. Condensate/MMCF	Gravity of Condensate
Actual Prod. Teet+MCF/D		Casing Pressure (Sbut-18)	Chote Size
Teeling Method (pitot, back pr.)	Tubing Procews (Shut-in)		
CERTIFICATE OF COMPLIAN	CE		
I hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	1901, 19
	h and that the information given a beat of my knowledge and belief.	BYBar	
ŕ		TITLE	
Bas Merles	1		compliance with RULE 1104. pwable for a newly drilled or deepene
/Sile	natwej	well, this form must be accomp	ordence with AULE 111.
Bob Menefee Administrative Coordints	or _ South Area	All sections of this form n able on new and recompleted	nust be filled out completely for allow wells.
June 30, 1981	(ile)		II, III, and VI for changes of owner orter, or other such change of condition
	Jare)	Separate Forms C-104 mi	ist be filed for each pool in multiply