| NO. OF COPIES RECEIVED | | | | |
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| DISTRIBUTION | NEW MEXICO OIL | CONSERVATION COMMISS. 4 | F C 104 | |
| SANTA FE | : | ST FOR ALLOWABLE | Form C-104 Supersedes Old C-104 and C-11 | |
| FILE | - NEWOE | | Effective 1-1-65 | |
| U.S.G.S. | AUTHORIZATION TO T | RANSPORT OIL AND NATURAL (| • | |
| LAND OFFICE | AUTHORIZATION TO T | | | |
| OIL | | Jan . 11 5 5 Å | 19 00 | |
| TRANSPORTER GAS | | | | |
| OPERATOR | - | | | |
| PRORATION OFFICE | | | | |
| Cperator | | | | |
| Export A Hai | nean | | | |
| Ernest A. Har | 12011 | | | |
| | 15 Dogwoll Now Mayico | | | |
| Reason(s) for filing (Check proper bo. | 15, Roswell, New Mexico | Other (Please explain) | | |
| New Well XX | Change in Transporter of: | G. I. G. I. G. | | |
| Recompletion | · . | Gas | | |
| | | densate | | |
| Change in Ownership | Cusingheda Gus Con | idensate | | |
| If change of ownership give name and address of previous owner | | | | |
| • | LEASE | | | |
| II. DESCRIPTION OF WELL AND Lease Name | Well No. Pool | Name, Including Formation | Kind of Lease | |
| Ramsay State | 1 Sca | arborough - Yates | State, Federal or Fee State | |
| Unit Letter A ; 330 | Feet From The North | Line and 330 Feet From | The East | |
| Line of Section 12 , To | ownship 26 South Range | 36 East, NMPM, | Lea County | |
| Line of Section 12 , 10 | Switch 20 South Hands | 30 Lu3 C 1 | Cou | |
| Name of Authorized Transporter of O | | GAS Address (Give address to which appro | oved copy of this form is to be sent) | |
| McWood Corporation | | 2003 Wilco Building, Midland, Texas | | |
| Name of Authorized Transporter of Co | asinghead Gas or Dry Gas | | Address (Give address to which approved copy of this form is to be sent) | |
| | | | | |
| ** ** ** ** | Unit Sec. Twp. Rge. | Is gas actually connected? Wh | nen | |
| If well produces oil or liquids, | | - | | |
| give location of tanks. | A 12 26-S 36- | E No! | Unknown | |
| give location of tanks. If this production is commingled w | A 12 26-S 36- | E No! | Unknown | |
| give location of tanks. If this production is commingled w IV. COMPLETION DATA | Oil Well Gas Well | E No | | |
| give location of tanks. If this production is commingled w | oith that from any other lease or pool | E No | | |
| If this production is commingled w IV. COMPLETION DATA Designate Type of Completi | Oil Well Gas Well | E No | | |
| give location of tanks. If this production is commingled w IV. COMPLETION DATA Designate Type of Complete Date Spudded | ion - (X) Oil Well Gas Well Date Compl. Ready to Prod. | No New Well Workover Deepen | Plug Back Same Res'v. Diff. Res'v. P.B.T.D. | |
| give location of tanks. If this production is commingled worder. IV. COMPLETION DATA Designate Type of Complete Date Spudded 4-21-66 | ion - (X) Oil Well Gas Well Date Compl. Ready to Prod. 5-10-66 | No N | Plug Back Same Res'v. Diff. Res'v. P.B.T.D. 3060 | |
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| give location of tanks. If this production is commingled worder. IV. COMPLETION DATA Designate Type of Complete Date Spudded 4-21-66 Pool Scarborough Perforations | ion - (X) Date Compl. Ready to Prod. 5-10-66 Name of Producing Formation Yates 2-3134, 3159-92, 3220-5 | No N | Plug Back Same Res'v. Diff. Res'v. P.B.T.D. 3060 Tubing Depth 2924 | |
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| give location of tanks. If this production is commingled w IV. COMPLETION DATA Designate Type of Completic Date Spudded 4-21-66 Pool Scarborough Perforations 2956-82' (prod.) 309 HOLE SIZE 12-1/4" 7-7/8" V. TEST DATA AND REQUEST IOLL WELL Date First New Oil Run To Tanks 5-10-66 Length of Test 24 hrs. Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) VI. CERTIFICATE OF COMPLIAN I hereby certify that the rules and Commission have been complied | Date Compl. Ready to Prod. 5-10-66 Name of Producing Formation Yates 2-3134, 3159-92, 3220-5 TUBING, CASING, A CASING & TUBING SIZE 8-5/8" 5-1/2" FOR ALLOWABLE (Test must b able for this Date of Test 5-10-66 Tubing Pressure Oil-Bbls. 144 Length of Test Tubing Pressure | No ol, give commingling order number: New Well Workover Deepen Total Depth 3305 Top Oil/Gas Pay 2956 5 (Squeezed). AND CEMENTING RECORD DEPTH SET 342 3298 re after recovery of total volume of load oil states for full 24 hours) Producing Method (Flow, pump, gas less depth or be for full 24 hours) Pumping Casing Pressure Water-Bbis. 10 Bbis. Condensate/MMCF Casing Pressure OIL CONSERVA | Plug Back Same Res'v. Diff. Res'v. P.B.T.D. 3060 Tubing Depth 2924 Depth Casing Shoe 3298 | |

Explor Mgr.

May 12, 1966

TITLE 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 Sections I, II, III, and VI only 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.