Submit 5 Copies
Appropriate District Office
DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

35755

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. United Gas Search, Inc. 30-025-25860 Address c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of Recompletion Dry Gas Oil Effective 11/1/91 Change in Operator Condensate Casinghead Gas If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Lease No. Missie, Federal or Free Glenn-Ryan 11 Rhodes · Yates-SR-Gas NM-7951 Location 1980 Feet From The North Line and Unit Letter _ 2180 West Feet From The Line 14 Township 265 Range 37E , NMPM, Lea III. 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 or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas Sid Richardson Carbon & Gasoline Co. 1st City Bank Tower, 201 Main St, FtWorth TX If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When? give location of tanks. Yes 6/21/91 If this production is commingled with that from any other lease or pool, give comminging order number: IV. COMPLETION DATA SID RICHARDSON GASOLINE CO Fff 3/1/93 New Well | Workover Oil Well Gas Well Deepen Plug Back Same Res'v Designate Type of Completion - (X) 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 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.) Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test 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 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 DEC 0 3 1991, is true and complete to the best of my knowledge and belief. Date Approved ()rig. Signed by la printe la Paul Kauta Signature Donna Holler By. Geologisti Agent Printed Name Title

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

505-

10-31-91

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.

Title.

FOR RECORD ONLY

VOD 30 1000

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.

RECEIVED
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