

4. (1) $\frac{1}{2} \sqrt{2}$ (2) $\frac{1}{2} \sqrt{2}$ (3) $\frac{1}{2} \sqrt{2}$ (4) $\frac{1}{2} \sqrt{2}$

SANTA FE, N. M. 2711 N. R. 100-2501

REQUEST FOR ALLOCATED
AID

P. O. BOX 10585, MIDLAND, TEXAS 79702

New Well ☒ ☐ Change in Transporter of: Casinghead gas has now been connected to
Recompletion ☐ Oil ☐ Dry Gas ☐ sales line. This Form C-104 is being
Change in Ownership ☐ Casinghead Gas ☒ Condensate ☐ filed to reflect casinghead gas transport

If change of ownership give name
and address of previous owner _____

2. DESCRIPTION OF WELL AND LEASE

Lessee Name George Etz	Well No. 6	Pool Name, Including Formation Jalmat Yates-Seven Rivers	Kind of Lease State, Federal or Fee Fee	Lease No.
Location				
Unit Letter P : 660 Feet From The South Line and 660 Feet From The East				
Line of Section 27	Township 23-S	Range 36-E	Lea	

1. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐					Address (Give address to which approved copy of this form is to be sent)	
Lantern Petroleum Corp.					BOX 2281, Midland, Texas 79702	
Name of Authorized Transporter of Gasoline Gas ☒ or Dry Gas ☐					Address (Give address to which approved copy of this form is to be sent)	
Warren Petroleum Corporation					P.O. Box 1589, Tulsa, Oklahoma 74102	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	P	27	23-S	36-E	Yes	6-10-1986

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

5. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug back	Same Reservoir	Drill. Re-
XX									
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
2-11-86			3600'			3547'			
Elevations (DF, RRB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
3369.3' GR	Yates/Seven Rivers		3164'			3140'			
Perforations						Depth Casing Shoe			
3164'-3429'						3600'			

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8"	447'	480 sx Class "C"
7-7/8"	4-1/2"	3600'	620 sx Lightweight + 380 Class "C" 50/50 Pozmix

7. 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.)	
2-27-86	3-4-86	Flowing	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	75	200	22/64"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	52	0	192

GAS WELL.

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (purp, back pr.)	Tubing Pressure (blat-in)	Coiling Pressure (blat-in)	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Steve A Douglas Steve A. Douglas

Vice-President, Operations

June 10, 1986

OIL CONSERVATION DIVISION

APPROVED _____, 19

on Little W. Socy

TITLE: Oil & Gas Inspector

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all applicable new and replacement vehicles.

Fill out only Sections I, II, III, and VI for changes of own
 name, name of vessel or transporter, or other such change of condition.

Separate Form C-104 must be filed for each pool in multi-