District I PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised October 18, 1994

Instructions on back

5 Copies

District II 811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION Submit to Appropriate District Office District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV ☐ AMENDED REPORT 2040 South Pacheco, Santa Fe, NM 87505 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT SOUTHWEST ROYALTIES, INC. ¹ OGRID Number P.O. BOX 11390 021355 MIDLAND, TX 79702 Reason for Filing Code CG 2/25/96 ⁴ API Number ⁵ Pool Name 30 - 025 - 27510 JALMAT TANSIL YATES SEVEN RIVERS (PRO GAS) * Pool Code 79240 Property Code * Property Name 18087 Well Number SHOLES A ¹⁰ Surface Location II. Ul or lot no. Section Township Range Lot.ldn Feet from the North/South Line | Feet from the East/West line County 24 **25S** 36 E 2310 **SOUTH** 330 11 Bottom Hole Location **EAST** LEA UL or lot no. Section Township Lot Idn Feet from the North/South line Feet from the East/West line County 12 Lse Code 13 Producing Method Code 14 Gas Connection Date 15 C-129 Permit Number " C-129 Effective Date 17 C-129 Expiration Date Oil and Gas Transporters Transporter 19 Transporter Name 20 POD 21 O/G OGRID 22 POD ULSTR Location and Address and Description 020809 SID RICHARDSON GASOLINE CO. 2200230 G 201 MAIN ST. FORT WORTH. Produced Water POD ²⁴ POD ULSTR Location and Description <u>2200250</u> Well Completion Data Spud Date 24 Ready Date 27 TD 38 PBTD 29 Perforations 36 DHC, DC,MC 31 Hole Size 32 Casing & Tubing Size 33 Depth Set 34 Sacks Cement VΙ. Well Test Data Date New Oil 34 Gas Delivery Date 37 Test Date 34 Test Length 37 Tbg. Pressure " Csg. Pressure 41 Choke Size 42 Oil 43 Water " Gas 45 AOF "Test Method ⁴⁷ I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my OIL CONSERVATION DIVISION knowledge and belief Signature ORIGINAL SIGNED BY JEF Approved by: DISTRICT I SUPERVISOR Printed name ANNA SCHELLING Title: Title PRODUCTION ANALYST Approval Date: Date Phone: 915 686 9927 A R 3 190, 48 If this is a change of operator fill in the OGRID number and name of the previous operato Previous Operator Signature

Printed Name

Title

Date