NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE OIL TRANSPORTER GAS OPERATOR PRORATION OFFICE Operator New Well Recompletion Change in Ownership If change of ownership give name and address of previous owner

Supersedes Old C-104 and C-110

NEW MEXICO OIL CONSERVATION COMMISSION Form C-104 REQUEST FOR ALLOWABLE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Phillips Petroleum Company Room 401, 4001 Penbrook, Odessa, Texas 79762 Reason(s) for filing (Check proper box) Other (Please explain) Change in Transporter of: Dry Gas Oil Plugback and recomplete. Casinghead Gas Condensate II. DESCRIPTION OF WELL AND LEASE
| Well No. | Pool Name, Including Formation Kind of Lease Legse No. XXXXXXXXXX Fee C. D. Woolworth 18 Jalmat Yates Gas Feet From The North Line and 2310 Feet From The West County , NMPM, Township 24-S Line of Section 26 Range 36-E Lea III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Oil | X | or Condensate | | | | Address (Give address to which approved copy of this form is to be sent) Box 1510, Midland, Texas 79701

Address (Give address to which approved copy of this form is to be sent) Texas New Mexico Pipe Line Company or Dry Gas Name of Authorized Transporter of Casinghead Gas X El Paso Natural Gas Company Box 1384, Jal, New Mexico Twp. P.ge. Is gas actually connected? Unit Sec. If well produces oil or liquids, give location of tanks. 24-S | 36-E C 126 yes If this production is commingled with that from any other lease or pool, give commingling order numbers IV. COMPLETION DATA Same Res'v. Diff. Res'v. Plug Back Gas Well New Well Workover Designate Type of Completion - (X) Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Depth Casing Shoe Perforations TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT HOLE SIZE CASING & TUBING SIZE DEPTH SET (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Casing Pressure Choke Size Tubing Pressure Length of Test Oil-Bbls. Water - Bbls. Gas - MCF Actual Prod. During Test **GAS WELL** Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) OIL CONSERVATION COMMISSION APR 1 4 1982 VI. CERTIFICATE OF COMPLIANCE APR 14 I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. *See Form C-102=NSP 1159, NW/4 & NE/4 SW/4 APPROVED ORIGINAL SIGNED BY JERRY SEXTON DISTRICT 1 SUPR. Section 26, 200 Acres. 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. (Signature Senior Engineering Specialist

(Date)

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI 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.

June 4, 1980