

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

I. Operator  
Pelto Oil Company

Address  
One Allen Center, Suite 1800, 500 Dallas Street, Houston, TX 77002

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name O'Brien "L"	Well No. 15	Pool Name, including Formation Twin Lakes SA Assoc.	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>B</u> : <u>950</u> Feet From The <u>North</u> Line and <u>1675</u> Feet From The <u>East</u> Line of Section <u>6</u> Township <u>9S</u> Range <u>29E</u> , NMPM, <u>Chaves</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Pecos River Gas Plant, c/o Liquid Energy Corp	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4000, The Woodlands, TX 77380
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. D 1 9S 28E
Is gas actually connected?	When Yes 1-12-85

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Bernie Malson Bernie Malson  
(Signature)  
Production Manager  
(Title)  
March 14, 1985  
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 27 1985, 19  
BY ORIGINAL SIGNED  
BY LARRY BROOKS  
TITLE GEOLOGIST - NMOC

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 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.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 12-27-84	Date Compl. Ready to Prod. 1-11-85	Total Depth 2900'			P.B.T.D. --				
Elevations (DF, RKB, RT, GR, etc.) 3975 GL 3987KB	Name of Producing Formation San Andres	Top Oil/Gas Pay <del>2724'</del> 2989'			Tubing Depth 2812'				
Perforations 2789-92'; 2794-96'; 2803-06'; & 2810-14'						Depth Casing Shoe 2888'			
<b>TUBING, CASING, AND CEMENTING RECORD</b>									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/2"	8-5/8 24#		160'		100 SX				
7-7/8"	5-1/2" 15.50#		2900'		810 SX				
	2 3/8		2812						

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (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 1-12-85	Date of Test 1-27-85	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hrs.	Tubing Pressure 20psi	Casing Pressure	Choke Size 2"
Actual Prod. During Test 6.25	Oil - Bbls. 1.75	Water - Bbls. 4.50	Gas - MCF 7.59

#### GAS WELL

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