

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 08-01-83
Page 1

I. Operator
Petrus Operating Company, Inc.

Address
12201 Merit Drive, Suite 900 Dallas, Texas 75251-2293

Reason(s) for filing (Check proper box)

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

Other (Please explain)
EFFECTIVE DATE OF CHANGE 07-01-86

If change of ownership give name and address of previous owner
Shell Western E&P, Inc. 200 North Dairy Ashford, P. O. Box 991, Houston, Texas 77001

II. DESCRIPTION OF WELL AND LEASE

Lease Name Henshaw Deep Unit	Well No. 2	Pool Name, including Formation Henshaw Wolfcamp	Kind of Lease State, Federal or Fee Federal	Lease No.
Location Unit Letter <u>C</u> : <u>660</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>24</u> Township <u>16S</u> Range <u>30E</u> , NMPM, Eddy 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 Co. Pipeline Division	Address (Give address to which approved copy of this form is to be sent) N. Freeman Ave., Artesia, New Mexico 88210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook Street, Odessa, Texas 79762
If well produces oil or liquids, give location of tanks.	Unit : <u>C</u> Sec. : <u>24</u> Twp. : <u>16</u> Rge. : <u>30</u> Is gas actually connected? <u>Yes</u> When <u>11-9-62</u> Post ID-3 <u>7-4-86</u> Chg Op

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.

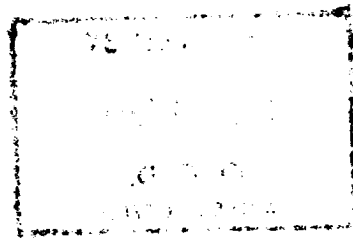
VI. CERTIFICATE OF COMPLIANCE

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.

Suzann Jourdan Suzann Jourdan
(Signature)
Regulatory Coordinator
(Title)
06-26-86
(Date)

OIL CONSERVATION DIVISION
APPROVED JUL 3 1986, 19
BY Les A. Clements
TITLE Supervisor District II

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.



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