

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

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

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REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JUL 20 '88

I. Operator Petrus Oil Company, L. P. ✓		O. C. D. ARTESIA, OFFICE
Address 12377 Merit Drive, Suite 1600		Dallas, Texas 75251
Reason(s) for filing (Check proper box)		Other (Please explain)
<input type="checkbox"/> New Well	Change in Transporter of:	EFFECTIVE 06-01-88
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	
	<input type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner: Mobil Producing TX & NM Inc., '9 Greenway Plaza, Suite 2700  
Houston, Texas 77046

II. DESCRIPTION OF WELL AND LEASE		Kind of Lease	Lease No.
Lease Name FEDERAL STATE Com	Well No. 1	State, Federal or Fee STATE	K 409
Pool Name, including Formation BURTON FLAT (MORROW)			
Location			
Unit Letter G	1600 Feet From The NORTH Line and 2100 Feet From The EAST		
Line of Section 6	Township 21 S	Range 27 E	County Eddy

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>		P.O. Box 175, ARTESIA, NM 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)
GAS COMPANY OF NEW MEXICO		1ST INTERNATIONAL Bldg, DALLAS, TX 75270
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? when
	G 6 21 S 27 E	YES 09-30-76

If this production is commingled with that from any other lease or pool, give commingling order number: POST 10-3  
7-29-88  
Cag op

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 Welch  
(Signature)  
Regulatory Coordinator  
(Title)  
07-14-88  
(Date)

OIL CONSERVATION DIVISION  
APPROVED JUL 27 1988  
BY Original Signed By  
Mike Williams  
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 deepen 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 wells on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions.  
Separate Forms C-104 must be filed for each pool in multiple completed wells.