

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

RECEIVED

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 <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	EFFECTIVE 06-01-88.

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

Lease Name FEDERAL	Well No. 2	Pool Name, including Formation CARLSBAD DELAWARE	Kind of Lease State, Federal or Fee FEDERAL	Lease No. 0560211
Location Unit Letter C 660 Feet From The NORTH Line and 1980 Feet From The WEST				
Line of Section 18 Township 21S Range 27E N.M.P.M. 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"/>	Address (Give address to which approved copy of this form is to be sent)
The Permian Corp.	P. O. Box 1183, Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Llano, Inc.	P. O. Box 1320, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
C 18 21S 27E	Yes ?

If this production is commingled with that from any other lease or pool, give commingling order number: Post 10-3

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

OIL CONSERVATION DIVISION

APPROVED JUL 27 1988  
BY Original Signed By Mike Williams  
TITLE

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 multiple completed wells.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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(Other instruct.  
verse side)

CATE  
OD re

Budget Bureau No. 1004-  
Expires August 31, 1985

4/5F

5. LEASE DESIGNATION AND SERIAL NO.

NM 0560291

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT" for such proposals.)

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

FEDERAL OO

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

CARLSBAD DELAWARE

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec B, T21S, R27E

12. COUNTY OR PARISH 13. STATE

Eddy

NM

1. WELL ☒ OTHER

JUL 25 '88

2. NAME OF OPERATOR

Petrus Oil Company, L. P.

3. ADDRESS OF OPERATOR

12377 Merit Drive, Suite 1600 Dallas, Texas 75251

ARTESIA OFFICE

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

See also space 17 below  
At surface

Unit Letter C, 660' FNL and 1980' FWL  
of Section 18.

14. PERMIT NO.

15. ELEVATIONS (Show whether DE, RT, GR, etc.)

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

REIL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRAC TURE TREAT

MULTIPLE COMPLETE

FRAC TURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDON\*

SHOOTING OR ACIDIZING

ABANDONMENT\*

Ownership change XX

(Note: Report results of multiple completion on Well  
Completion or Recompletion Report and Log form.)

17. (For REPAIR, RECOMPLETION, or ABANDONMENT, give pertinent details, including estimated date of starting any  
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-  
cinent to the work.)

Effective June 1, 1988, Petrus Oil Company, L. P. acquired the above property  
from Mobil Producing TX & NM Inc.

ACCEPTED FOR RECORD

JUL 27 1988

CARLSBAD, NEW MEXICO

RECEIVED  
JUL 20 11 01 AM '88  
CARLSBAD AREA

18. I hereby certify that the foregoing is true and correct

SIGNED

*Suzann Welch*

Suzann Welch

TITLE Regulatory Coordinator

DATE 07-14-88

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See: Instructions on Reverse Side