

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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| OPERATOR               | /           |
| PRODUCTION OFFICE      |             |

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

Form C-104  
Revised 10-01-78  
Format 36-01-83  
Page 1

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JUL 20 '88

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. O. C. D.  
Operator Petrus Oil Company, L. P. ARTESIA, OFFICE  
Address 12377 Merit Drive, Suite 1600 Dallas, Texas 75251  
Reason(s) for filing (Check proper box):  
☐ New Well ☐ Change in Transporter of:  
☐ Recompletion ☐ Oil ☐ Dry Gas  
☒ Change in Ownership ☐ Casinghead Gas ☐ Condensate  
Other (Please explain): 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<br><u>Federal m m Com</u>   | Well No.<br><u>1</u> | Pool Name, including Formation<br><u>South Carlisle Monow</u> | Kind of Lease<br>State, Federal or Fee <u>Federal</u> | Lease No.<br><u>Um-62791</u> |
| Location<br>Unit Letter <u>F</u> <u>1980</u> Feet From The <u>N</u> Line and <u>1980</u> Feet From The <u>W</u><br>Line of Section <u>13</u> Township <u>23-S</u> Range <u>26 E</u> N.M.P.M. Eddy County |                      |   |   |                              |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |
|--|--|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent)<br><u>P. O. Box 1183, Houston, TX 77001</u> |
| 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)<br><u>P. O. Box 1320, Hobbs, NM 88240</u>   |
| If well produces oil or liquids, give location of tanks.<br>Unit <u>F</u> Sec. <u>13</u> Twp. <u>23S</u> Rge. <u>26E</u> | Is gas actually connected? <u>Yes</u> when <u>12-6-73</u>  |

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

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  
JUL 27 1988

APPROVED \_\_\_\_\_, IS \_\_\_\_\_  
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 deviated 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.