

No. of Copies Received \_\_\_\_\_  
 Date of Receipt \_\_\_\_\_  
 COUNTY \_\_\_\_\_  
 STATE \_\_\_\_\_  
 COUNTY \_\_\_\_\_  
 OPERATOR \_\_\_\_\_  
 TRANSPORTER \_\_\_\_\_  
 OPERATOR \_\_\_\_\_  
 REGISTRATION OFFICE \_\_\_\_\_

NEW MEXICO OIL CONSERVATION COMMISSION  
 REQUEST FOR ALLOWABLE AND  
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
 Supersedes Old C-104 and C-110  
 Effective 1-1-65

LEASE NO. 1931 MIDLAND, TEXAS  
 (Indicate whether lease is new or old)

Reason for filing (Check proper box) Other (Please explain)  
 New Well  Change in Transporter or Oil  
 Abandonment  C. Dry Gas  
 Change in Ownership  Casinghead Gas Condensate Effective July 1, 1966

If change of ownership, give name and address of previous owner: PEIROSE PRODUCTION Co 1505 Commerce Bldg Ft Worth, TX

SECTION I - NAME OF WELL AND LEASE  
 Lease No. 1931 Well No. 1 Pool Name, including Formation \_\_\_\_\_ Kind of Lease \_\_\_\_\_  
 Location \_\_\_\_\_ State, Federal or Foreign \_\_\_\_\_  
 Unit Depth \_\_\_\_\_ Feet From The \_\_\_\_\_ Line and \_\_\_\_\_ Feet From The \_\_\_\_\_  
 Township \_\_\_\_\_ Range \_\_\_\_\_ N.M.P.M. \_\_\_\_\_ County \_\_\_\_\_

SECTION II - DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  
 Name of Authorized Transporter of Oil  or Condensate \_\_\_\_\_ Address (Give address to which approved copy of this form is to be sent) \_\_\_\_\_  
 Name of Authorized Transporter of Casinghead Gas  or Dry Gas \_\_\_\_\_ Address (Give address to which approved copy of this form is to be sent) \_\_\_\_\_  
 If well produces oil or liquids, in what form of tanks? \_\_\_\_\_ Unit \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ R. \_\_\_\_\_ Is gas already connected? \_\_\_\_\_ When \_\_\_\_\_

SECTION III - COMPLETION DATA  
 Designate Type of Completion - (X) \_\_\_\_\_  
 Date Spudded \_\_\_\_\_ Date Comp. Ready to Prod. \_\_\_\_\_ Total Depth \_\_\_\_\_ P.S.T.D. \_\_\_\_\_  
 Elevation D.R., R.R.S., RT, CR, etc., \_\_\_\_\_ Name of Producing Formation \_\_\_\_\_ Top Oil/Gas Way \_\_\_\_\_ Tubing Depth \_\_\_\_\_  
 Perforations \_\_\_\_\_ Depth Casing Shoe \_\_\_\_\_  
 TABLE - TOTAL CEMENT AND BACKS CEMENT  

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	BACKS CEMENT

SECTION IV - TEST DATA AND REQUEST FOR ALLOWABLE (This part of form requires a total volume of test oil and must be equal to or exceed top allowable for this depth or as per full test results)  

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
Gas - MCF	Length of Test	Water - Condensate/MCF	Gravity of Condensate
Testing Method (Flow, pack off)	Tubing Pressure	Casing Pressure	Choke Size

SECTION V - CERTIFICATE OF COMPLIANCE  
 I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  
 APPROVED \_\_\_\_\_, 19\_\_\_\_  
 BY \_\_\_\_\_  
 TITLE \_\_\_\_\_

Ack Long  
Director  
 JULY 3, 1966  
 (Date)

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 logs taken on the well in accordance with RULE 1104.  
 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 depth or other matters not otherwise covered by this form.