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

STATE OF NEW MEXICO  
 ENERGY AND MINERALS DEPARTMENT

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

REQUEST FOR ALLOWABLE  
 AND  
 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

**I. Operator**  
 Pelto Oil Company

**Address**  
 One Allen Center, Suite 1800, 500 Dallas Street, Houston, TX 77002

**Reason(s) for filing (Check proper box)**

<input type="checkbox"/> New Well	<b>Change in Transporter of:</b>	<input type="checkbox"/> Dry Gas	Other (Please explain)  Effective 4-01-87
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas		

If change of ownership give name and address of previous owner Petrus Oil Company, L.P., 12201 Merit Drive, Suite 900, Dallas, TX 75251-2293

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Fee	Lease No.
Moonshine 7 Battery 2	7	Twin Lakes SA Assoc.	State, Federal or Fee		

**Location**  
 Unit Letter L ; 330 Feet From The W Line and 2310 Feet From The S  
 Line of Section 7 Township 9S Range 29E, NMPM, Chaves 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"/> Permian Corporation <b>Permian (Eff. 9 / 1 / 87)</b>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3119, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Pelto Oil Company	Address (Give address to which approved copy of this form is to be sent) One Allen Center, Suite 1800, Houston, TX 77002
If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>--</u> Twp. <u>9S</u> Rge. <u>29E</u>	Is gas actually connected? <u>Yes</u> When <u>4-29-82</u>

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.

Bernie Malson  
 (Signature)  
 Production Administration Manager  
 (Title)  
 April 3, 1987  
 (Date)

OIL CONSERVATION DIVISION

APR 15 1987

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY John Williams  
 Oil & Gas Inspector

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 multiply completed wells.