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

Ferm C-104 Revised 10-01-78 Fermet 06-01-83 Page 1

OPERATION OFFICE	AUTHOI	REQUEST F	FOR ALLOWA AND ISPORT OIL		RAL GAS		
Petrus Conerating	Company.	Inc.					
12201 Merit Drive,	Suite 90	O Dallas	, Texas	75251-22	93		
Ressen(s) for filing (Check proper box)				ther (Please			
Recompletion Change in Ownership	uı ou	n Trenspertor of:	Dry Ges Cendensete	····	EFFECTIVE 11	-01-86	
If change of ownership give nome and address of previous owner			<del>-</del>	<del></del>			
II. DESCRIPTION OF WELL AND							
10	Well No.	Pool Name, including			Kind of Lesse		Lesse Ne
Moonshine /8 Battery	/	Twin Lakes S	A Assoc.		State, Federal or Fee	Fee	
Unit Letter D : 530	Feet From	m TheL	ine and	330	Foot From The	W	
Line of Section 8 Town	this 95	Range	29E	, NM <b>PM.</b>	Chaves		
III DESIGNATION OF THE COLOR				· · · · · · · · · · · · · · · · · · ·			County
III. DESIGNATION OF TRANSPO	RTER OF C	OIL AND NATURA	L GAS				
Permian Corporation					which approved copy		o be senej
Name of Authorized Transporter of Casin	ghead Gas (X)	of Dry Gas	Address (Giv	00X 3119	Midland, TX	79702	
Pelto Oil Company		_			er, Ste 1800,		
is well produces on or names.	Inii Sec.	Twp. Rge.	is gas actual	ly connected	? , When	noust m,	13 .002
give location of tanks.	K + 18	9S 29E	Yes		1 2-2	3-83	
I this production is commingled with	that from any	other lease or pool,	give comming	ling order o	umberi	<u> </u>	
NOTE: Complete Parts IV and V				_			
			11				
71. CERTIFICATE OF COMPLIANCE	Œ			OIL CO	NSERVATION DI	VISION	
hereby certify that the rules and regulations	of the C .	revation Division have	APPROVE		JAN 3 0 1987		
een complied with and that the information g	given is interest	mplete to the best of			Original Signed	Bv.	
			BY		Mike William	<del></del>	•
,			TITLE		Oil & Gas Inspe	ctor	
1. 2			This				
Signalure	Sultarii.	urdan	If this	Is a reques	flied in complianc t for allowable for a		
Regulatory Co	=			one must of	accompanied by a	0 - b	the desiette
(Title)	Oluliid		All sec	tions of thi	A form must be fille		alu (aa -11-
	11-13-5	$I_{1}$	} -0.0 00 000	A SUM LACOR	braced merra.		
(Date)		<del></del>	Fill ou well name o	it only Sec	tions I. U. III, and transportes or other	VI for change	. of owner.
			Separat	e Forms C	-104 must be filed	for each poo.	or condition.