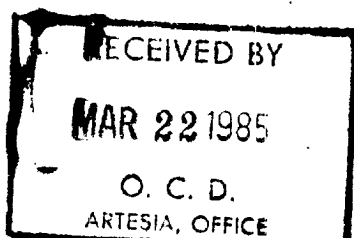


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Pelto Oil Company

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

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership
 Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name O'Brien "L"	Well No. 16	Pool Name, Including Formation Twin Lakes SA Assoc	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter G : 2310 Feet From The North Line and 1675 Feet From The East Line of Section 6 Township 9S Range 29E, NMPM, Chaves County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

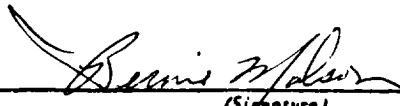
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 159, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Pecos River Gas Plant, c/o Liquid Energy Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 4000, The Woodlands, TX 77380	
If well produces oil or liquids, give location of tanks. Unit D Sec. 1 Twp. 9S Rge. 28E	Is gas actually connected? yes	When 1-02-85

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 Manager
(Title)
March 14, 1985
(Date)

OIL CONSERVATION DIVISION
APPROVED MAR 28 1985, 19
BY ORIGINAL SIGNED
BY LARRY BROOKS
TITLE GEOLOGIST - NMCD

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X					
Date Spudded 12-16-85	Date Compl. Ready to Prod. 1-02-85	Total Depth 2925'			P.B.T.D. --				
Elevations (DF, RKB, RT, GR, etc.) 3956'-GR; 3967'-RKB	Name of Producing Formation San Andres	Top Oil/Gas Pay 2713' 2782			Tubing Depth 2793'				
Perforations 2782' - 2807' non-continuous						Depth Casing Shoe 2925'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"		8-5/8" 24#		161'		80 SX			
7-7/8"		5-1/2" 15.5#		2925'		850 SX			
		23/8		2793					

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 1-02-85	Date of Test 1-12-85	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 hrs.	Tubing Pressure 20 psi	Casing Pressure --	Choke Size 2"
Actual Prod. During Test 23.5	Oil - Bbls. 15.69	Water - Bbls. 7.81	Gas - MCF 12.26

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size