

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Petrus Operating Company, Inc.
Address
12201 Merit Drive, Suite 900 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)
Have 250.60 barrels of condensate to be cleared from tanks.
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
State	1	Bagley - Lower Penn Gas (Strawn)	State, Federal or Fee State	V-983
Location Unit Letter I; 1980 Feet From The South Line and 660 Feet From The East Line of Section 34 Township 11S Range 33E, NMPM, Lea 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)
UPG, Inc.	P. O. Box 4658, Houston, TX 77210-4658
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Test Tanks I 34 11S 33E	Is gas actually connected? When No

If this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
		X	X					X
Date Spudded 8-25-84	Date Compl. Ready to Prod. 11-21-84	Total Depth 11,016	P.B.T.D. 10,245					
Elevations (DF, RKB, RT, GR, etc.) 4267' RKB	Name of Producing Formation Strawn	Top Oil/Gas Pay 9885'	Tubing Depth 9792'					
Perforations 9885-9904'; 9914-9918'	Depth Casing Shoe 11,014'							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
17-1/2"	13-3/8 68#	405'	425					
11"	8-5/8 32#	3860'	1700					
7-7/8"	5-1/2 17#	11,014'	650					

VI. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(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	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 WELL

Actual Prod. Test - MCF/D 12-11-84	Length of Test 24	Bbls. Condensate/MCF 36.3	Gravity of Condensate 55.8
Testing Method (pilot, back pr.) Flowing	Tubing Pressure (Shut-in) 1502	Casing Pressure (Shut-in) 300	Choke Size 12/64"

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 above is true and complete to the best of my knowledge and belief.

C. L. Hardy

Drilling & Production Manager

12-12-84

(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 18 _____

BY _____ ORIGINAL SIGNED BY _____

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.