STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION

SANTA FE

FILE

U.S.G.S.
LAND OFFICE

TRANSPORTER

OPERATOR

PROGRATION OFFICE

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

1.			
Operator			
Petrus Oil Company, L. P.			
12777 Monit Drive Suite 1600	Dallas, Texas 75251		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:			
Recompletion Oil	Dry Gas EFFECTIVE 03-01-87		
X Change in Ownership Casinghead Gas	Condensate		
A create in outside in			
If change of ownership give name Amoco Production Company, P. O. Box 68, Hobbs, NM 88240			
and address of previous owner Annoto Production Comp			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, Includi	i i	,ease No.	
North Baum SWD System 1 Und. Baum U	pper Penn State LG	4904	
Location			
Unit Letter N : 660 Feet From The South	Line and 1980 Feet From The West		
Line of Section 18 Township 13-S Range	33 - Е , ммрм, <u>Lea</u>	County	
THE THREE PARTY OF THE PARTY OF	DAT CAS		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATU	Address (Give address to which approved copy of this form is to be	sent)	
Nome of Authorized Transporter of Cit			
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be	sent)	
Name of Authorized Indiaporter of Land			
Unit Sec. Twp. Rge	Is gas actually connected? When		
If well produces oil or liquids, give location of tanks.			
	nol give commingling order number:		
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.			
AT CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION			
VI. CERTIFICATE OF COMPLIANCE			
I hereby certify that the rules and regulations of the Oil Conservation Division	APPROVED MAY 6 1999 , 19-		
been complied with and that the information given is true and complete to the be	11		
my knowledge and belief.	ORIGINAL SIGNED BY JERRY SEXTON		
	TITLE DISTRICT I SUPERVISOR		
This form is to be filed in compliance with MULE 1104,			
Suzann Welch Suzann Welch	If this is a request for allowable for a newly drilled or deepened		
(Signature)	well, this form must be accompanied by a tabulation of the tests taken on the well in accordance with RULE 111.	well, this form must be accompanied by a tabulation of the deviation	
' Regulatory Coordinator	li	for allow-	
(Title) All sections of this form must be filled out completely for allow able on new and recompleted wells.			
April 25, 1988 Fill out only Sections I. II, III, and VI for changes of owner			
(Date) well name or number, or transporter, or other such change of condition			
	Separate Forms C-104 must be filed for each pool is completed wells.	n mutipiy	