	ARTMENT			Form	- C-104
	1				ed 10-01-78
DISTRIBUTION		OIL CONSERV	ATION DIVISIO	N Form	at 06-01-83 1
SANTA FE			OX 2088		•
PILE			W MEXICO 87501		
U.S.G.A.		SANTA PE, NE	W MEXICO 01501		
LAND OFFICE					
TRANSPORTER GAS		REQUEST FO	OR ALLOWABLE		
OPERATOR	•		AND	•	
PROBATION OFFICE	- AUTHO	DRIZATION TO TRANS	SPORT OIL AND NATU	RAL GAS	
			<del> </del>		
Operator					
Petrus Oil Con	<u>mpany, L. P.</u>		·		
Address					
12377 Merit D	rive, Suite 1	.600Dal	las, Texas 7525	1	
Reason(s) for filing (Check pro	oper box)		Other (Please		100 000
X New Well	Change	in Transporter of:		NGHKAD GAS MUST	NUT SHE
Recompletion	🗌 oil	1 🗌 I	Dry Gas FLA	RED AFTER	88
Change in Ownership		isinghead Gas	Condensate UNL	ESS AN EXCEPTION	TO R-4970
f change of ownership give nd address of previous own N I. DESCRIPTION OF WE	INTER THIS OFFICE	LIF YOU DO NOT CON	R-8603	· · · · · · · · · · · · · · · · · · ·	
Lease Name	Well N	o. Pool Name, Including		Kind of Lease	Lease No.
-		Maliamar Gra	yburg-San Andres	State, Federal or Fee State	e 2516-B
<u>State D</u>	7_	Maijamai Ola	yburg-ball Andres	5000	
Location Unit Letter;	Feet F	rom The South L	ine and1750	_ Feet From The _East	
Line of Section 13	Township	17S Range	33Е , ммрм	. Lea	County
Line of Section 1.J					
III. DESIGNATION OF T	RANSPORTER OF	FOIL AND NATURA	L GAS	in which approved come of this fo	em is to be sent!
	RANSPORTER OI	FOIL AND NATURA	Address (Give address)	o which approved copy of this fo	rm is to be sent)
III. DESIGNATION OF T Name of Authorized Transporte JM Petroleum Corpo	er of Oli 🔀 or	Condensate	2323 Rouran IR	185 Dallas Texas	75201
III. DESIGNATION OF T	er of Oli 🔀 or	Condensate	2323 Rouran IR		75201
III. DESIGNATION OF T Name of Authorized Transporte JM Petroleum Corpo Name of Authorized Transporte	er of Oll 🔀 or oration er of Casinghead Gas	Condensate	Address (Give address 2323 Bryan, I.B Address (Give address	<u>185 Dallas Texas</u> to which approved copy of this fo Odessa, TX <u>79762</u>	75201
III. DESIGNATION OF T Name of Authorized Transporte JM Petroleum Corpo Name of Authorized Transporte Phillips 66 Natura	er of Oil 🔀 or oration er of Casinghead Gas 11 Gas Co.	Condensate	Address (Give address 2323 Bryan, I.B Address (Give address	185 Dallas, Texas to which approved copy of this fo Odessa, TX 79762	75201
III. DESIGNATION OF T Name of Authorized Transporte JM Petroleum Corpo Name of Authorized Transporte Phillips 66 Natura	er of Oil 🗶 or oration er of Casinghead Gas il Gas Co. Unit S	Condensate	Address (Give address 2323 Bryan LB Address (Give address 4001 Penbrook, Is gas actually connect	185 Dallas, Texas o which approved copy of this fo Odessa, TX 79762	75201
III. DESIGNATION OF T Name of Authorized Transporte JM Petroleum Corpo Name of Authorized Transporte Phillips 66 Natura	er of Oll 🔀 or pration er of Casinghead Gas il Gas Co. Unit S 0	Condensate	Address (Give address 2323 Bryan, I.B Address (Give address 4001 Penbrook, Is gas actually connect No	185 Dallas Texas to which approved copy of this for Odessa, TX 79762 when when Pending	75201

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.

Luna	n Welch	Suzann Welch
	(Signature)	
0		Coordinator
	(Title)	
	04-29- <u>88</u>	
	(Date)	

· C	DIL CONSERVATION DIVISION	N
APPROVED	Mie i buu	
BY	Orig. Signed by	
TITLE	Orig. Signed by Paul Keutz Geologist	

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.

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## IV. COMPLETION DATA

Designate Type of Comple	etion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v
Date Spudded	Date Compl. Ready to Prod.	χ Τotal Depth	P.B.T.D.
03-12-88	03-26-88	4705	4670
Elevations (DF, RKB, RT, GR, etc	., Name of Producing Formation		
4705' GR	705' GR Gravburg-SanAndres		3862
Performations 4645-4658' & 4460-44	Depth Casing Shoe 4703		
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4	8-5/8	1501	800
7-7/8	5-1/2	4703	1375
			······································

## 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 allow-OIL WELL able for this depth or be for full 24 houre)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pu	Producing Method (Flow, pump, gas lift, etc.)	
04-11-88	04-18-88	Pumping		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
24	30	30		
Actual Prod. During Test	Oll-Bbls.	Water-Bbis.	Gas-MCF	
31	31	24	15	

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Teeting Method (pitot, back pr.)	Tubing Pressure ( shut-is )	Casing Pressure (Shut-in)	Choke Size

MAY 4 1998 MAY 4 1998