STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

		_	_
		1	
DISTRIBUTION			
BANTA FE			
FILE			
U.S.O.S.		1	
LAND OFFICE		1	
TRANSPORTER	OIL		
	GAB		
OPERATOR			
PROBATION 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

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	AUTHORIZATION TO TRANS	SPORT OIL AND NATU	JRAL GAS	
Operator				
Petrus Oil Comp	any, L.P.	<u> </u>		_
Address				
12201 Merit Dri	ve. Suite 900	Dallas, Texas	75251-2293	
Reason(s) for filing (Check proper box)		Other (Pleas	re explain)	
Recompletion	Change in Transporter of:	EFFECTIVE 01-01-87		
XX Change in Ownership	=	Ory Gas EFFECTIVE UI-UI-8/		
AN CHARGE III CHARGAI		ondensate		
If change of ownership give name and address of previous owner	Petrus Operating (Company, Inc.	(Same as above)	
II. DESCRIPTION OF WELL AND LEA	A CD			
	NOE Well No. Pool Name, Including F	ormation	Kind of Lease	Legse No.
Federal 3	2 Lusk Bone Spi	ring Fact	State, Federal or Fee Federal	Ledde No.
Location	z j zask bone sm	ing, Last	rederal	_/
Unit Letter J : 1980	Feet From The South Lin	ne and1730	Feet From The East	
Line of Section 3 Township	19S Range	32E , NMPN	Lea	County
III. DESIGNATION OF TRANSPORT	ER OF OIL AND NATURA	IGAS Shut-in		•
Name of Authorized Transporter of Oil 🟋	or Condensate	Adaress (Give address	to which approved copy of this form is	to be sent)
Texaco Trading & Transpor	tation	16825 Northcha	ise Ste 600 Houston	TY 77060
Texaco Trading & Transportation 16825 Northchase, Ste. 600, Houston. Name of Authorized Transporter of Casinghead Gas ♥ or Dry Gas Address (Give address to which approved copy of this form is		to be sent)		
Phillips 66 Natural Gas C	ompany	584 Frank Phil	lips Bldg., Bartlesvill	e. OK 740
If well produces oil or liquids, Unit Sec. Twp. Rge.		Is gas actually connect	ed? When	
give location of tanks.	3 19S 32E	<u>No</u>	l	
If this production is commingled with that	from any other lease or pool,	give commingling orde	r number:	
NOTE: Complete Parts IV and V on r.	everse side if necessary.			
VI. CERTIFICATE OF COMPLIANCE	A AND THE PARTY NAMED IN COLUMN TO THE PARTY NAMED IN	01.0	ONSERVATION DIVISION	
VI. CERTIFICATE OF COMPLIANCE				
I hereby certify that the rules and regulations of the		APPROVED	MAR 2 1987	19
been complied with and that the information given my knowledge and belief.	is true and complete to the best of		·	
		BY	INAL SIGNED BY JERRY SEXTON	
		TITLE	DISTRICT I SUPERVISOR	
1 0 1		This form is to be filed in compliance with RULE 1104.		
Sugar Jourdan Si	ızann Jourdan	If this is a request for allowable for a newly drilled or deepens		
Regulatory Coord	inator	well, this form must	t be accompanied by a tabulation of well in accordance with RULE 111	f the deviation I.
(Title) 02-20-87	·	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
(Date)		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.		

