Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico nergy, Minerals and Natural Resources Departr

Form C-104 Revised 1-1-19 See Instruction

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

Comparison Company C	1000 Rio Brazos Rd., Aziec, NM 87410	REQU	EST FO	A SC	LOWAE	AND NA	AUTHORIZ ATURAL GA	ATION S				
Refric UII	I. Operator	TO TRANSPORT OIL					Well API No.					
P. O. Box 51311, Midland, Texas 79710 Reasonation for fluing (Chicag Proper but) Now Wall Counge in Transporter of Counge in Transporter of Counge in Operator of Operator of Providing Promotion of Providing Pro		any						30-	025-031	03		
Reament of Filling (Clead proper load)		land. To	exas	7971	0							
Recompletion						o	her (Please expla	in)				
Cause the Operator	New Well		Change in	•								
If classes of specific give same and exchange processory operation of processors and exchange processors of processors and exchange processors. III. DESCRIPTION OF WELL AND LEASE Lease New Northeast Pearl Queen Unit 3 Pearl Queen Northeast Pearl Queen Unit 4 Pearl Queen Northeast Pearl Queen Unit 4 Pearl Queen Northeast Pearl Queen Unit 5 Pearl Queen Northeast Pearl Queen Unit 6 Pearl Queen Unit 6 Pearl Queen Northeast Pearl Queen Unit 6 Pearl Queen Unit 6 Pearl Queen Unit 6 Pearl Queen County of Northeast 1 Pearl Queen County Pearl Queen Unit 6 Pearl Queen County Pearl Queen	· ca		i Gas 🔲	•			(Effe	ctive N	ovember	1, 1989)	
IL DESCRIPTION OF WELL AND LEASE Lease Name Not the text Pear Queen Unit 3 Pear Queen Quee	If change of operator give name	rack Pe	troleu	ım Co	., Inc.	, 500 V	V. Texas,	Ste. 14	85, Mid	land, TX	79701	
Leas Name Northeast Pear Queen Unit 3 Pear Queen												
Northeast Pear Queen Unit 3 Pear Queen Constitue												
Usit Letter 0 : 2310 Feet From The _E65t Line and _330 Feet From The _South Line		<u>Unit</u>	3	Pea	rl Que	en	······································			1 683	70	
Section 15 Township 19-S Range 35-E NNDPM. Lea Cooley III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Audionicons Transporter of Congrain or Condensia. Shell Pipe Line Company. Shell Pipe Line Company. Or Condensia. Address (Gree delivate to which approved copy of this form is to be seast). P. O. Box 2648, Houston, Texas 77252 Name of Audionicon Transporter of Canaghead Gue Or or Dry Gue D. Address (Gree delivate to which approved copy of this form is to be seast). Name of Audionicon of Congrain of Congra	0	. 231	10	Feat Fr	om The _E	ast <u>u</u>	ne and330	<u> </u>	et From The .	South	Line	
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Audinocode Transporter of Oil Or Condensate Address (One address to which approved copy of this form is to be sent)	ור	- 10_9						Lea			County	
Name of Authorized Transporter of QI X Shell Pipe Line Company Name of Authorized Transporter of Qianghead Qia Xi or Dry Qia P. O., Box 2648, Houst Stort, Texas 77252 Name of Authorized Transporter of Canaghead Qia Xi or Dry Qia P. O., Box 2648, Houst Stort, Texas 77252 Name of Authorized Transporter of Canaghead Qia Xi or Dry Qia P. O., Box 2648, Houst Stort, Texas 77252 Name of Authorized Transporter of Qianghead Qia Xi or Dry Qia P. O., Box 2648, Houst Stort, Texas 77252 Name of Authorized Transporter of Canaghead Qia Xi or Dry Qia P. O., Box 2648, Houst Stort, Texas 77252 Name of Authorized Transporter of Qianghead Q												
Shell Pipe Line Company D. Box 2648. Houston, Texas 77252 Name of Authorized Triansporter of Casaphead Gas Or Dry Gas Admens (Give address to which approved copy of Male from 16 he texts)					D NATU	RAL GAS	ive address to wh	ich approved	coon of this f	orm is to be se	ns)	
Name of Authorized Tresupporter of Cataloghead Gas Xi	·	(X)	or Consen	MALE .		1						
Warren Petro Pet	Name of Authorized Transporter of Casing	thead Gas	\Box	or Dry	Gas	Address (G	ive address to wh	ich approved	copy of this f	orm is so be se	nt)	
To be production in community of the form say other lease or pool, give community or or number: If this production is community of the form say other lease or pool, give community or or number: If this production is community of the form say other lease or pool, give community or or number: Designate Type of Completion - (X) Due Spadded Date Completion - (X) Due Spadded Date Completion - (X) Due Spadded Date Completion - (X) Date Spadded Date Completion - (X) Name of Producing Formation Top Oli/Cas Pay Tubing Depth Performations TUBING, CASING AND CEMENTING RECORD Depth Casing Shore TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE OEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE DIL WELL That must be after recovery of local volume of local of and must be equal to or exceed top allowable for that depth or be for full 24 hours.) Due first New Oil Run To Task Due of Teel Tubing Pressure Casing Pressure Choke Size CASING Fressure Choke Size OIL CONSERVATION DIVISION NOV 1 J 1989 Signature Printed Name Printed Name Printed Name Printed Name Printed Name Title			•	Th	l Pos					14 /4102	-	
Designate Type of Completion - (X) Date Specified Designate Type of Completion - (X) Date Specified Date Compl. Ready to Prod. Date Specified Depth Casing Depth Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE DILL WELL Test must be after recovery of load volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date of Test Date of Test Date of Test Date of Test Casing Pressure Choice Size CASING For NCF/D Length of Test Dill Date of Test Dill Date of Test Dill Date of Test Da	if well produces oil or liquids, give location of tanks.		-		, -							
Designate Type of Completion - (X) Date Compl. Ready to Prod. Date Spudded Date Compl. Ready to Prod. Dist Spudded Date Compl. Ready to Prod. Dist Spudded Date Compl. Ready to Prod. Developes Pay Tubing Depth Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE DIL WELL (Itsi must be after recovery of local volume of lood oil and must be equal to or exceed top allowable for this depth or be far full 24 hours.) Date Fire New Oil Rus To Teak Date of Tea Tubing Pressure Casing Pressure Choice Size Choice Size VI. OPERATOR CERTIFICATE OF COMPLIANCE Investory of the rules and regulations of the Oil Conservation Division have been complicited with add that the information gives above is true and completes to the best of my knowledge and belief. Division have been complicate to the best of my knowledge and belief. Title Date Printed Name Title Depth Convertions Depth Casing Shoe Page Sack Same Rest Virtual Depth PB.T.D. Posting Page Sack Same Rest Virtual Depth PB.T.D. Total Depth PB.T.D. Posting Page Sack Sack Sack Sack Sack Sack Sack Sack		from any other	r lease or p	pool, giv	ve commingi	ing order nur	nber:				,,	
Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D. Revisions (DF, RKB, RT, GR, etc.) Name of Producing Formatics Top Oil/Cas Pay Tubing Depth Depth Casing Shore TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE DIL WELL (Test must be after recovery of total volume of load oil and must be espeal to or exceed top allowable for this depth or be for full 24 hours.) Date Of Test Tubing Pressure Casing Pressure Choke Size CASING Test - MCF/D Length of Test Oil - Bbis. Water - Bbis. Gas - MCF Totaling Method (Piton, book pr.) Tubing Pressure (Shut-is) Totaling Method (Piton, book pr.) Tubing Pressure (Shut-is) Oil CONSERVATION DIVISION Division have been complied with add that the information gives above is true and complete to the best of my knowledge and belief. Title Signature Title Total Producing Method (Piton, book pr.) Title	IV. COMPLETION DATA		Oil Well		Gas Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
Elevations (DF, RRB, RT, GR, etc.) Name of Producing Formations Tubing, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE DIL 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 of Test Date of Test Date of Test Casing Pressure Casing Pressure Choke Size Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complicit with ad that the time information given above is true and complete to the best of my knowledge and belief. Date Printed Name Title	Designate Type of Completion		<u>i </u>	_i_			<u>i</u>			İ	1	
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE DIL WELL (Test must be after recovery of total volume of load oil and must be spead to or exceed top allowable for this depth or be for full 24 hours.) Date First New Oil Run To Task Date of Test Producing Method (Flow, pump, par lift, sec.) Length of Test Tubing Pressure Casing Pressure Choke Size CAS WELL Actual Prod. During Test Oil - Bbis. Casing Pressure Water - Bbis. Casing Pressure Choke Size Cravity of Condensate Totaling Method (piton, bock pr.) Tubing Pressure (Shus-in) Casing Pressure (Shus-in) Choke Size OIL CONSERVATION DIVISION Division have been complied with sud that fire information given shove is true and complete to the best of my knowledge and belief. Date Printed Name 1 - 7 - 8 9 Telephone No. Title Title Title Title Title Title Title Title	Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE DIL 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 Tank Date of Test Tubing Pressure Casing Pressure Choke Size Choke Size Choke Size Choke Size Oil - Bbis Water - Bbis Gas WELL Actual Prod. Test - MCFID Length of Test Tubing Pressure (Shut-in) Tubing Pressure (Shut-in) Condensate MOKCF Oravity of Condensate Oil CONSERVATION DIVISION Division have been complied with and than the information given above is true and complete to the best of my knowledge and belief. Signature Signature 1 - 7 - 89 1 - 7 - 89 2 - 5 - 5 - 3 - 3 - 3 - 3 - 3 - 3 - 3 - 3	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE DIL WELL Test must be after recovery of local volume of local oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date First New Oil Rus To Tank Date of Test Tubing Pressure Casing Pressure Choke Size Choke Size Actual Prod. Tost - MCFID Length of Test Oil - Bbis. Water - Bbis. Condensate/MONCF Gravity of Condensate VI. OPERATOR CERTIFICATE OF COMPLIANCE Thereby certify that the rules and regulations of the Oil Conservation Division have been complied with and than the information given above is true and complete to the best of my knowledge and belief. Signature Signature Title	Perforations								Depth Casing Shoe			
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT SACKS CEMENT SACKS CEMENT SACKS CEMENT SACKS CEMENT SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE DIL WELL (Test must be after recovery of total volume of lood oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date of Test Date of Test Tubing Pressure Casing Pressure Choke Size Choke Size Choke Size Choke Size OIL CONSERVATION DIVISION Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief. Signature Printed Name 11-7-89 Date Telephone No.												
V. TEST DATA AND REQUEST FOR ALLOWABLE DIL 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 of Test Date of Test Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Choke Size Actual Prod. During Test Oil - Bbls. Water - Bbls. Casing Pressure Choke Size Gas-MCF Gravity of Condensate Tubing Pressure (Shus-in) Tubing Pressure (Shus-in) Choke Size VI. OPERATOR 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. Signature Printed Name 1 - 7 - 89 Title Title Title Title Title Title Title Title		· · · · · · · · · · · · · · · · · · ·				CEMENT		<u>D</u>	T	SACKS CEM	ENT	
DIL 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 Rub To Tank Date of Test Tubing Pressure Casing Pressure Choke Size GAS WELL Actual Prod. Tost - MCF/D Length of Test Tosting Method (picot, back pr.) Tubing Pressure (Shus-in) Tosting Method (picot, back pr.) Tubing Pressure (Shus-in) Casing Pressure (Shus-in) Choke Size OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Printed Name Title 11-7-89 715/693-372/ Telephoon No.	HOLE SIZE	CASING & TOBING SIZE			Der in de l							
DIL 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 Rub To Tank Date of Test Tubing Pressure Casing Pressure Choke Size GAS WELL Actual Prod. Tost - MCF/D Length of Test Tosting Method (picot, back pr.) Tubing Pressure (Shus-in) Tosting Method (picot, back pr.) Tubing Pressure (Shus-in) Casing Pressure (Shus-in) Choke Size OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Printed Name Title 11-7-89 715/693-372/ Telephoon No.												
DIL 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 Rub To Tank Date of Test Tubing Pressure Casing Pressure Choke Size GAS WELL Actual Prod. Tost - MCF/D Length of Test Tosting Method (picot, back pr.) Tubing Pressure (Shus-in) Tosting Method (picot, back pr.) Tubing Pressure (Shus-in) Casing Pressure (Shus-in) Choke Size OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Printed Name Title 11-7-89 715/693-372/ Telephoon No.												
DIL 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 Rub To Tank Date of Test Tubing Pressure Casing Pressure Choke Size GAS WELL Actual Prod. Tost - MCF/D Length of Test Tosting Method (picot, back pr.) Tubing Pressure (Shus-in) Tosting Method (picot, back pr.) Tubing Pressure (Shus-in) Casing Pressure (Shus-in) Choke Size OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Printed Name Title 11-7-89 715/693-372/ Telephoon No.	V. TEST DATA AND REQUES	T FOR A	LLOWA	BLE	 	L						
Length of Test Tubing Pressure Casing Pressure Choke Size Chok	OIL WELL (Test must be after ri	ecovery of lou	al volume e	of load a	oil and must	be equal to a	or exceed top allo	wable for this	depih or be	for full 24 hou	rs.)	
Actual Prod. During Test Actual Prod. During Test Oil - Bbis. Water - Bbis. Gas-MCF Gravity of Condensate Cravity of Condensate Oracing Method (pitot, back pr.) Tubing Pressure (Shus-in) Tubing Pressure (Shus-in) Casing Pressure (Shus-in) Choke Size VI. OPERATOR 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. Date Approved By Orig. Signed by, Paul Knutz Geologist Title Title Title Title Title	Date First New Oil Run To Tank	Date of Test	l			Producing is	nediod (Fion, pa	/·ψ. <u>శ</u> లు 1911 1				
GAS WELL Actual Prod. Test - MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate Fosting Method (pitot, back pr.) Tubing Pressure (Shus-in) Casing Pressure (Shus-in) Choke Size VI. OPERATOR 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. Date Approved Nûv 1 2 1989 Orig. Signed by, Paul Knutz Geologist Title Title Title Title	Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
GAS WELL Actual Prod. Test - MCF/D Length of Test Bibls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR 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. Date Output Date Orig. Signed by, Paul Knutz Geologist Title Title Title Title	I Ded Deserved	Oil Phi			Water - Bbls			Gas- MCF				
Actual Prod. Test - MCF/D Length of Test Bible. Condensate/MMCF Gravity of Condensate Choke Size VI. OPERATOR 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 its true and complete to the best of my knowledge and belief. Printed Name Title 11-7-89 Paul Kautz Geologist Title	Actual Prod. During 188	OII - DOIS.										
Tosting Method (pitot, back pr.) Tubing Pressure (Shus-in) Casing Pressure (Shus-in) Casing Pressure (Shus-in) Choke Size VI. OPERATOR 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. Date Orig. Signed by Paul Knutz Geologist Title 11-7-89 9/5/693-3/2/ Telephone No.	GAS WELL											
VI. OPERATOR 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. Date Approved OIL CONSERVATION DIVISION Date Approved NOV 1 0 1989 Date Approved By Orig. Signed by, Paul Kautz Geologist Title Title Title Title Title	Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
VI. OPERATOR 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. Date Approved Orig. Signed by, Paul Kautz Geologist Title Title Title Title Title	Testing Method (pitot, back or.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
Thereby 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. Date Approved Orig. Signed by. Paul Kautz Geologist Title Title Title Title Title Title	· · · · · · · · · · · · · · · · · · ·											
Thereby certify that the rules and regulations of the Oil Conservation Division have been complete with and that the information given above is true and complete to the best of my knowledge and belief. Date Approved Orig. Signed by. Paul Rautz Geologist Title Title Title Title Title Title					NCE		OIL CON	ISERV	ATION	DIVISIO	N	
Signature Printed Name Printed Name Title	I hereby certify that the rules and regular Division have been complied with and	utions of the C that the inform	Dil Consen mation give	vation en above	:							
Signature Printed Name Printed Name Title	is true and complete to the best of my is	mowledge and	d belief.			Dat	e Approve	d	NU	ATOR		
Signature Printed Name Printed Name Title 11-7-89 Paul Kautz Geologist Title Title Title	V AM						.,		20	mir Simo	d b v	
Printed Name Title 11-7-89 Date Geologist Title Title Title Title	Signature	-gr				By.			C	Paul Kau	rtz.	
11-7-89 9/5/693-3/2/ Date Telephone No.	- Kandall (apps.		ついへ Title	<u> </u>	Ti41.	9			Geologis	ì <u>r</u>	
	11-7-89	9	15/6	23-	3/2/		J					
			Tele	phone N	10.		1.0405/2017.nd				244 S. V.	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.