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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Livergy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

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

OIL CONSERVATION DIVISION P.O. Box 2088

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

I.

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator					-		We	II API No. 30-025	- n2	185	
Sirgo Operating, Inc.	<u> </u>							10-023	5 - UJ	102	
	idland,	Texas	79702								
Reason(s) for Filing (Check proper box)	<u></u>				Oth	es (Please expla	ain)				
New Well		· · ·	Transporter of:			-				Co., L.	
Recompletion	Oil Casinghead		Dry Gas l Condensate [Sirgo Ope ember 1.		g, Inc. e	ffective	<u> </u>	
If change of operator give name						ember 1. Merit Dr.		uite 900	Da11a	s. Texas	
Petrus 011 Company, L.P. II. DESCRIPTION OF WELL AND LEASE								2200	75251-2293		
Lesse Name East Pearl Queen Uni	Well No. Pool Name, Including Pearl (Q						nd of Lease te, Federal or Fe	\	ease No.		
Location	. 198	^		<		e and 66	Λ		11/201		
Unit Letter	_:110	<u>U</u> 1	Feet From The	==0	Lin	e and <u>Q</u> Q	<u>U</u>	Feet From The	VVEST	Line	
Section 22 Townshi	p 19S	1	Range 351	E	, NI	мрм,	Le	ea .		County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		OF OIL		TUI	RAL GAS	Ing.	ecto	ped conv of this fi	tive	ent)	
Name of Authorized Transporter of Oil Shell Pipeline Corp. Address (Give address to Chich approved copy of this form is to be sent) P.O. Box 1910 Midland, Texas 79702											
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Warren Petroleum Phillips 66 Natural Gas Co.					Address (Giv	ox 1589	ick appro	ed copy of this for	orm is to be sell 10ma 74	702	
Phillips 66 Natural (atural Gas Co. Junit Sec. Twp. Rge.			Rge.	4001 Penbrook U			lessa Texas 79762			
give location of tanks.	F		198 351	- 1	yes				2/4/59		
If this production is commingled with that in IV. COMPLETION DATA	from any othe	r lease or po	ool, give comm	ningli	ing order numb	per:			-	<u> </u>	
Designate Type of Completion	- (X)	Oil Well	Gas Wel	11	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl	. Ready to F	rod.		Total Depth		L	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Dep	Tubing Depth		
Perforations					Depth Casing Shoe				g Shoe		
		innic c	ACINO (ATP.	(TE) (TE) (TE)	IC DECOR					
HOLE SIZE	UBING, CASING AND SING & TUBING SIZE			DEPTH SET				SACKS CEMENT			
TOLL OILL	0/10	3114 d 705114 012E			JEI III JEI				CHOILO OLINEITI		
						· · · · · · · · · · · · · · · · · · ·					
V. TEST DATA AND REQUES								I			
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Test		load oil and n						or full 24 hou	rs.)	
Daic Of Ics					Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure			Casing Pressure			Choke Size	Choke Size			
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF	Gas- MCF			
GAS WELL	A						···				
Actual Prod. Test - MCF/D	Length of Test				Bbls, Condensate/MMCF			Gravity of C	Gravity of Condensate		
Sesting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size	Choke Size			
VI. OPERATOR CERTIFICA	ATE OF (СОМРІ	JANCE								
I hereby certify that the rules and regulations of the Oil Conservation					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.					Date Approved NOV 2 1 1989						
Julie Godfrey					By ORIGINAL SIGNED BY JERRY SEXTON						
Signature Julie Godfrey Production Tech.							DISTRIC	T I SUPERVIS	OR		
November 14, 1989	(91	5) 685	itle -0878 one No.	-	Title.	·			<u> </u>	·	
Date		relebu	NUC IVO.	- 1	1						

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.

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