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

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							ATTINO.			
Sirgo Operating, In	.c.					30	0-025	S - 0	3190	
Address			70700							
	Midland, Te	xas	79702							
Reason(s) for Filing (Check proper box			ansporter of:		her (Please expl	•				
New Well Recompletion	Change in operator from Petrus 0il Co., L.I									
Change in Operator	Oil Casinghead Gas	_	ry Gas	to Sirgo Operating, Inc. effective November 1. 1989						
If change of country give name										
and address of previous operator	etrus Oil Co		, L.P.	12201	Merit Dr.	Sui	te 900		s, Texas -2293	
II. DESCRIPTION OF WEL										
Lease Name East Pearl Queen Un			ool Name, Includi Pearl (C				of Lease Federal of Fee		ease No.	
	it 5	<u> </u>	reall (C	(deen)					12.1.1	
Location Unit Letter	: 2310	Fe	et From The <equation-block></equation-block>	erth Lin	ne and 165	50F	et From The <u></u>	<u>Nest</u>	Line	
Section 22 Town	ship 19S	Ra	inge 35E	, <u>N</u>	мрм,	Lea	1		County	
ur projektimenter m	Nonongen	n 011	4.3.00 31.4.000 to	D. J. G. G	T	· +				
III. DESIGNATION OF TRA Name of Authorized Transporter of Oil		ondensate			maddaala	ecro	Lacon of this for	is to be a		
Shell Pipeline Corp	I AI	Ollocusan		Address (Give address to which approved copy of this form is to be sent)						
	Pro. Box 1910 Midland, Texas 79702									
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Warren Petroleum Phillips 66 Natural Gas Co.				Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589 Tulsa, Oklahoma 74102 4001 Penbrook Odessa, Texas 79762						
If well produces oil or liquids,	Unit Sec	TV	vp. Rge.		y connected?	When	sa, rexas ?		4	
ive location of tanks.	F 27	**.	9s 35E	-	es		2/4/5	59	•	
f this production is commingled with th	at from any other lea	se or poo	l, give commingl	ing order num	ber:					
V. COMPLETION DATA		Well	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v	
Designate Type of Completio	n - (X)		I	1		<u> </u>	İ		İ	
Date Spudded	Date Compl. Rea	idy to Pro	xd.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Top Oil/Gas Pay			Tubing Depth						
Perforations										
remorations							Depth Casing	shoe	·	
	TT IDI	V.C. C.	CINC AND	CIEN (EN ITTE	VG PEGOD		<u> </u>		····	
TUBING, CASING AND				CEMEN II.		<u> </u>	T			
HOLE SIZE CASING & TUBING SIZE					DEPTH SET	···	SA	SACKS CEMENT		
						 -				
· · · · · · · · · · · · · · · · · · ·										
			·····							
. TEST DATA AND REQUE	ST FOR ALLO	WABI	LE	· · · · · · · · · · · · · · · · · · ·			 			
	recovery of total vol	wne of lo	ad oil and must	be equal to or	exceed top allo	wable for this	depth or be for	full 24 hour	rs.)	
Date First New Oil Run To Tank	Date of Test			Producing Me	thod (Flow, pu	np, gas lift, e	tc.)			
ength of Test	Tubing Pressure	Tubing Pressure			ıre		Choke Size			
	Oil - Bbls.				·		Gas- MCF			
Actual Prod. During Test				Water - Bbis.						
GAS WELL							l			
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate			
					· · ·			•		
esting Method (pitot, back pr.)	Tubing Pressure (Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
I. OPERATOR CERTIFIC	TATE OF CO	MPI I	ANCE			·	<u> </u>	<u> </u>		
					DIL CON	SERVA	ATION DI	VISIO	Ν	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					NOV 2 1 1989					
is true and complete to the best of my				Data	Approved	i	ITUY &	T 120	ゴ	
Q1 4 11	7			Dale	Whhinasc	· ———				
Julie Dodfrey					A D12	21414				
Signature Production Tech					By BRIGINAL SIGNED BY JERRY SEXTON					
Julie Godfrey Production Tech. Printed Name Title						M17 [K]C	T I SUPERVI	SOR	•	
November 14, 1989	(915)			Title.				· · · · · · · · · · · · · · · · · · ·		
Date		Telephon								

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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