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ropriate District Office  
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O Rio Brazos Rd., Aztec, NM 87410

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

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

erator Moralo, Inc.	Well API No. 3-025-31473
Address P.O. Box 832 Midland, Texas 79702-0832	
ason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Completion <input type="checkbox"/> Change in Operator <input type="checkbox"/> Change of operator give name Address of previous operator	<input type="checkbox"/> Other (Please explain) Casinghead Gas MUST NOT BE FLARED AFTER 4-5-92 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED. THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.

DESCRIPTION OF WELL AND LEASE			
Well Name Perseus 26 State	Well No. 1	Pool Name, Including Formation Spencer (Penn)	Kind of Lease <input checked="" type="checkbox"/> State Federal or Fee Lease No. Y-3762
Location Unit Letter G : 1980 Feet From The East Line and 1980 Feet From The North Line Section 26 Township 17S Range 36E, NMPM, Lea County			

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS							
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent) 502 Northwest Ave. Levelland, Texas 79336					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)					
Well produces oil or liquids, or location of tanks.	Unit G	Sec. 26	Twp. 17S	Rge. 36E	Is gas actually connected? No	When ?	
this production is commingled with that from any other lease or pool, give commingling order number.							

VI. COMPLETION DATA									
Designate Type of Completion - (X)		Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 12-9-91	Date Compl. Ready to Prod.		Total Depth 11,150			F.B.T.D. 10,157 RBP			
Levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Penn.		Top Oil/Gas Pay 10,054			Tubing Depth 10,394			
Perforations 10,472 - 10,478		10,054 - 10,084		Depth Casing Shoe					

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8"	407	425 SX Class C
11"	8 5/8"	4500	300SX Howco Lite + 250SX C.
7 7/8"	5 1/2"	11,150	550 SX HL + 350 SX 50/50
	2 7/8"	9947	Poz

VII. TEST DATA AND REQUEST FOR ALLOWABLE			
OIL 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 2-5-92	Date of Test 2-9-92	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 14	Tubing Pressure 310 psi	Casing Pressure	Choke Size 18/64"
Actual Prod. During Test	Oil - Bbls. 171	Water - Bbls. 0	Gas - MCF 163

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing 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.	
Signature Brenda Coffman	Agent
Printed Name	Title
Date	(915) 684-7441 Telephone No.

OIL CONSERVATION DIVISION	
FEB 14 1992	
Date Approved	
By	
Title	

- 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.