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

I.

State of New Mexico .rgy, Minerals and Natural Resources Departn

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

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator					Well	API No.		-	
Pyramid Energy, Inc.						30-025-03239			
Address									
Reason(s) for Filing (Check proper be	dro, Suite 700	San An	tonio, Te	exas 782 her (Please expl	32		_		
New Well	•	n Transporter of:		•	•	from Sire	o Oner	atina	
Recompletion	Change in Transporter of: Change in operator from Sirgo Operating, Oil Dry Gas Inc. to Pyramid Energy, Inc. effective							tive	
Change in Operator	Casinghead Gas	Condensate [1, 1990		6,,	01100		
If change of operator give name and address of previous operator	Sirgo Operating	, Inc.	P.O. Box'	3531	Midland	l, Texas	79702	 .	
II. DESCRIPTION OF WEI									
Lease Name East Pearl Queen	Well No.	mit Well No. Pool Name, Include			t t	Kind of Lease No. State, Federal ov Fee			
Location Location	onit 34	Pearl	Queen)			is, reastar of ree			
Unit Letter . I	:1980	_ Feet From The _	South Lin	e and 660	F	eet From The	East	Line	
Section 28 Tow	nship 19S	Range 35E	, N	мрм,	Lea			County	
III. DESIGNATION OF TR	ANSPORTER OF O	II. AND NATI	IRAL GAS		DDO	DUCER			
Name of Authorized Transporter of O	il 5074	Phergy Pipel	Address (Giv	e address 10 wi	ich approve	d copy of this for	n is to be se	eni)	
Shell Pipeline Cor		ffective 4	ne Ferre	ox 1910	Midlan	d, Texas	79702		
Name of Authorized Transporter of Co Warren Petroleum	asinghead Gas	ffective 4-1-9	Address (Giv	e address to wh	iich approved Tu	copy of this form	nis 10 be se	ent)	
Phillips 66 Natura If well produces oil or liquids,	Cas Co. Polit Box 1589 Unit Sec. Twp. Rge. Is gas actually connected?					Tulsá, 0K 74102 Odessa, TX 79762 When?			
give location of tanks.	F27	19S 35E	E Yes Fe			bruary 4, 1959			
If this production is commingled with t IV. COMPLETION DATA	hat from any other lease or	pool, give comming	gling order numl	ber:		,			
Designate Type of Completi	On - (X)	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to	Prod.	Total Depth		<u> </u>	P.B.T.D.		<u> </u>	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Fo	Top Oil/Gas Pay							
			•			Tubing Depth			
Perforations	-1			Depth Casing S	Shoe				
		11	·						
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE					T			
TIOLE OILE	OASING a TO	CASING & TOBING SIZE		DEPTH SET			SACKS CEMENT		
									
V. TEST DATA AND REQU	FST FOR ALLOWA	ARIE	<u>.</u>						
	er recovery of total volume		t be equal to or	exceed ton allo	wahle for thi	e denth or he for	full 24 hour	- 1	
Date First New Oil Run To Tank	Date of Test			thod (Flow, pu			WI 24 NOW	5./	
U at a CT - a									
Length of Test	Tubing Pressure	Tubing Pressure		Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.			Gas- MCF			
<u>-</u>									
GAS WELL		 	<u> </u>	-					
Actual Prod. Test - MCF/D	Length of Test	Length of Test		Bbls. Condensate/MMCF			Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Design (6)								
reduing triculous (pulos, back pr.)	I doing Fressure (Shut-	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFI	CATE OF COMP	LIANCE	<u> </u>			<u> </u>	·		
I hereby certify that the rules and res	gulations of the Oil Conserv	zation	C	IL CON	SERVA	ATION DI	VISIO	N	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			JUN		UN 2 9, 1990,				
A L C . A			Date	Approved		OUN Z	4 1320	<u> </u>	
Seath Las									
Signature South Courses	∥ By	Сивим	CIPIETE						
Scott Graef Production Engineer			DISTRICT I SUPERVISOR						
(512) 490-5000			Title_		~113	Urekvisor			
Date	Telep	phone No.		•					
			Ш						

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.