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

DISTRICT II P.O. Drawer DD, Anesia, 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

l.		אחו טו	MINOL	ON I OIL	- AND NA	TUNAL G					
Operator	_						Well	API No.	r 000		
Pyramid Energy, Inc.						30-025-03292					
Address	C4 = = =	200		. A	. m.	70000					
14100 San Pedro, Reason(s) for Filing (Check proper box		UU	San	Antoni	o, Texas	s 78232 er (Please expl	ain)				
New Well	,	Change in	Transe	orter of:				r from	Sirgo On	erating,	
Recompletion	Oil		Dry G			ic. to Py					
Change in Operator	Casinghe	ad Gas		ensate		ıly 1, 1		0,,			
If change of operator give name and address of previous operator					P O Par	. 2521	Widler	d Torra	- 70703		
II. DESCRIPTION OF WEL			<u> </u>	IC •	r,0, b02	(3331	MIGIAL	u, rexa	S 197UZ		
Lease Name Well No. Pool Name, Includin										Lease No.	
East Pearl Queen Unit 51 Pearl (Q						ueen)			Federal or Fee E-5887		
Location Unit LetterL	. 1	.980	Feet F	om The Sc	outh Lin	e and 660	F	et From The	West	Line	
Section 34 Towns	ship 198		Range	, 3	5E , NI	MPM,	Lea			County	
III. DESIGNATION OF TRA				ND NATU	RAL GAS		(INJE				
Name of Authorized Transporter of Oil		or Conder	nsale		Address (Giv	e address to w	nich approved	copy of this f	orm is to be se	nt)	
Name of Authorized Transporter of Cas	inghead Gas		or Dry	Gas	Address (Giv	e address to w	hich approved	copy of this f	orm is to be se	nt)	
If well produces oil or liquids, give location of tanks.				Rge.	Is gas actually connected? Wh			n ?			
If this production is commingled with th	at from any oti	ner lease or	pool, g	ive comming	ing order num	ber:					
IV. COMPLETION DATA										_,	
Designate Type of Completion	n - (X)	Oil Well	١	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded						Total Depth			P.B.T.D.		
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations						,		Depth Casing Shoe			
									, S 0.100		
· · · · · · · · · · · · · · · · · · ·		TUBING.	CASI	NG AND	CEMENTI	NG RECOR	.D				
HOLE SIZE CASING & TUBING SIZE					DEPTH SET			SACKS CEMENT			
								ļ			
U TECT DATE AND DEOL	cer ron	I I OW	ADIE	,				ļ,			
V. TEST DATA AND REQUI					he caual to an	avasad ton all	owahla for thi	denth or he	for full 24 hour	re)	
OIL WELL (Test must be after Date First New Oil Run To Tank			oj ioaa	ou ana musi					or juit 24 hou		
Date First New Oil Run To Tank Date of Test						Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	Tubing Pro	Tubing Pressure				Casing Pressure			Choke Size		
Asset Band During Test	03 714				Water - Bbls.			Gas- MCF			
Actual Prod. During Test	ring Test Oil - Bbls.				Water - Boils						
GAS WELL				,							
Actual Prod. Test - MCF/D	Length of	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate		
Festing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
O									· · · · · · · · · · · · · · · · · · ·		
VI. OPERATOR CERTIFI	CATE OF	COME	LIAI	NCE		NI 001	IOED'	ATION!	רון אורויי	\	
I hereby certify that the rules and reg					OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above					IIIA O O 1000					Α	
is true and complete to the best of my knowledge and belief.					Date Approved						
Sext Trail											
Signature		•			∥ By_	Gelau	Al arestablish	\ () E			
Scott Graef Production Engineer						ORIGINAL SIGNISED BY JERRY SEXTON DISTRICT I SUPERVISOR					
Printed Name	(51:	2) 490	Title -5000	0	Title			-UPCKVIS	Ų K		
Date	,		phone l		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.