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 Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Öperator	·	10 111/	11101	OI II OIL	- 7110 117	TOTIAL		API No.			
Pyramid Energy, Inc.						30-025-03293					
Address		-				·					
14100 San Pedro, S	Suite 7	00	San	Antoni	o. Texa:	s 78232					
Reason(s) for Filing (Check proper box)						er (Please expl	ain)			· · · · · · · · · · · · · · · · · · ·	
New Well		Change is	Transp	orter of:	CI	hange in	operato	r from	Sirgo Op	erating,	
Recompletion	Oil		Dry G			nc. to Py					
Change in Operator	Casinghea	d Gas	Conde	_	J۱	ıly 1, 1	990.	•••			
If change of operator give name and address of previous operator Sin	до Оре	rating	, In	ic.	P.O. Box	x 3531	Midlar	ıd, Texa	s 79702)	
II. DESCRIPTION OF WELL	AND LE	ASE						-		····	
Lease Name Well No. Pool Name, Including Fast Pearl Oueen Unit 53 Pearl Oueen Pool Name Pool Name						· · · · · · · · · · · · · · · · · · ·			of Lease No. Federal or Fee E 5007		
East Pearl Queen I	Jnit	- 55	P	earl (Q	ueen)		State,	reueial of re	e E-58	87	
Location Unit LetterN		990	East E	ionos The S	South Lin		10 Fe	et From The	Wes	t Line	
			_ reet r	Tom The	JOUETT LI	e and	<u>LU</u> re	et riom The	WCS	Line	
Section 34 Townshi	199	3	Range	35E	, N	MPM, L	ea			County	
THE PROPERTY OF THE AND	~~~~					1-		\			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUR											
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)										ni)	
Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent)					nt)					
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.			Is gas actually connected? When			?				
If this production is commingled with that i	from any oth	er lease or	pool, gi	ve commingl	ing order num	ber:					
IV. COMPLETION DATA											
Designate Type of Completion	· (X)	Oil Well	ij	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded					Total Depth			P.B.T.D.			
Revations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations					L	Depth Casing Shoe					
	7	UBING,	CASI	NG AND	CEMENTI	NG RECOR	D	···			
HOLE SIZE					DEPTH SET				SACKS CEMENT		
W. MROW D. M. LAND DEFOLUTION	m non	T T OTT						l			
V. TEST DATA AND REQUES										,	
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Te		of load	oil and must	,	 			for full 24 how	rs.)	
Date First New Oil Rull 10 Talls	Producing Method (Flow, pump, gas lift, etc.)										
Length of Test	Tubing Pressure				Casing Pressure			Choke Size	Choke Size		
-					_						
Actual Prod. During Test	d. During Test Oil - Bbls.				Water - Bbis.			Gas- MCF			
								<u> </u>			
GAS WELL											
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate			
Festing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI ODED ATOD CEDITIES	ATE OF	COM	T T A N	NCE	ار			1			
VI. OPERATOR CERTIFICATE OF COMPLIANCE					OIL CONSERVATION DIVISION						
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.					JUN 2 9 1990						
1 11. 01 1	-		•		Date	Approve	u		- *	-	
Scott Start					_	Origin	NAL COSES	255 15			
Signature					By CHOINAL SIGNED BY CERY SEXTON DISTRICT I SUPERVISOR						
Scott Graef Production Engineer							much	· >UPERVI	SOR		
Printed Name	(512	2) 490	Title -5000)	Title						
Date	· · · · ·		phone l								

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.