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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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

•		O INA	1401	OITI OIL	ANDIV	<u> </u>		Well A	PI No.				
Operator Pyramid Energy, Inc.									30-025-03295				
Address													
14100 San Pedro	, Suite	700		San Anto	onio, Te	xas 7	78232	<del>-</del>					
Reason(s) for Filing (Check proper box)		Change in	Transm	orter of:		•	•	ator f	rom Sir	go Oper	ating.		
New Well Recompletion	Oil	· · · ·	Dry G			_	-			. effec			
Thange in Operator	Casinghead		Conde	F3	July	1, 19	990.						
change of operator give name and address of previous operator Si	rgo Oper	ating.	Inc	P.	0. Box'	3531	Mi	dland.	Texas	79702			
I. DESCRIPTION OF WELL AND LEASE Lease Name Well No.   Pool Name, Including						ng Formation				-,1	Lease No.		
East Pearl Queen Unit 39 Pearl (							State,	State, Federal of Fee					
ocation				N	iomth		660.			East			
Unit LetterA	_ :6	60	. Feet F	rom The	orth Lin	and	000.	Fe	et From The _		Line		
Section 34 Townsh	in	19S	Range	35E	. NI	ирм,	Lea	1			County		
Section 34 Towns	<u></u>		, reality of										
II. DESIGNATION OF TRAI	SPORTE			ID NATU	RAL GAS			DUCER		arm is to be s	nut)		
Name of Authorized Transporter of Oil	$\mathbf{x}$	or Conden	sate		Address (Giv	ox 19	IO M	<i>approvea</i> idland	i, Texas	orm is to be se 79702	inu)		
Shell Pipeline Corp			or Dry	/ Gas	Address (Giv	e address	to which	approved	copy of this fo	ormis to be se	ent)		
Name of Authorized Transporter of Casin Warren Petroleum Phillips 66 Natural	Gae Co	ريون			4081	Box 1	589 66 k	Od o	lsa, OK essa, TX	<u> </u>			
f well produces oil or liquids,	Unit		Twp. Rge.		Is gas actually connected?			•	When? February 4, 1959				
ve location of tanks.	j F	27	<u> </u>		Yes		<del></del>	] Fe	oruary 4	+ <b>,</b> 1959	w-		
this production is commingled with that V. COMPLETION DATA	from any our	ler lease or	poor, g	ive commingi	ing order num			<u></u>					
		Oil Well		Gas Well	New Well	Workov	er	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion		al Pandu to	) Dend		Total Depth	ł			P.B.T.D.	J			
Spudded Date Compl. Ready to Prod.									1,0,1,0,				
levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay				Tubing Depth				
					Depth Casing Shoe								
erforations									Depui Casii	ig Shoe			
	า	TIBING.	CAS	ING AND	CEMENTI	NG REC	CORD		<u>'</u>				
HOLE SIZE	CASING & TUBING SIZE				<u> </u>	DEPTH			SACKS CEMENT				
										· ···.			
				<del></del>				· · · · · · · ·					
. TEST DATA AND REQUE					l								
IL WELL (Test must be after			of load	oil and must	be equal to or	exceed to	p allowa	ble for thi	s depth or be	for full 24 hou	urs.)		
Date First New Oil Run To Tank	Date of Te	st			Producing M	emod (Pic	w, ритф	, gas iyi, e	ac.)				
ength of Test	Tubing Pressure				Casing Pressure				Choke Size				
		Tuesday 1								0.000			
Actual Prod. During Test	Oil - Bbis.				Water - Bbls.				Gas- MCF				
					1				<u> </u>				
GAS WELL	15				IDSIa Canda	4010 A A A	~rc		Cmvity of	Condensate			
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF				Gravity of Condensate				
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size				
							<u> </u>						
VI. OPERATOR CERTIFIC	CATE OF	COM	PLIA	NCE		א וור	ONIC		ΔΤΙΩΝΙ	DIVISIO	NC		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above							CINC						
is true and complete to the best of my			CH WOO	76	Date	Annr	oved	•	JUN 2	9 1990	1		
	-				Date	Appr	UVEU						
Seith Suf				,	By_	CPI	(AINIA)	Clarker	The gratuit consission	is a gramma			
Signature Scott Graef Production Engineer						By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR							
Printed Name		2) 490-	Title		Title				errore vita	·~ (1			
<u>6/25/90</u> Date	.01,		ephone										
Date		1 616	-hinne	140.	11								

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.