STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	-	
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.4.		
LAND OFFICE		
TRANSPORTER	OIL	
	TAS	
OPERATOR		
PROMATION OF	KE	

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiply

REQUEST FOR ALLOWABLE

PROMATION OFFICE	AUTHORIZATION TO TRA	AND NSPORT OIL AND NATURAL GAS	
Petrus Operating (Company, Inc.		
Address 12201 Merit Drive	, Suite 900 Dallas,		
Reason(s) for filing (Check proper box) New Well Recempletion	Change in Transporter of:	Other (Please explain) Dry Gas EFFECTIVE DATE OF CHANGE 07	-01-86
If change of ownership give name and address of previous owner Si	hell Western E&P, Inc	. 200 North Dairy Ashford, P. O. Box 99	1,
II. DESCRIPTION OF WELL AND I	EASE	Houston, Tex	as 77001
East Pearl Queen Unit	Well No. Pool Name, including 45 Pearl Queen	Formation Kind of Lease State, Federal or Fee	Lease Na.
Unit Letter G: 1980	Feet From The Nacth	ine and 1980 Feet From The East	
Line of Section 34 Townsh	up 19S Range	35E , NMPM, Lea	County
Name of Authorized Transporter of Cit & Shell Pipeline Corporation	or Condensate	ALGAS Temporary Abandone Address to which approved copy of this form is P.O. Box 1910, Midland, Texas 79702	lo be sent)
Phillips Eetroleum Corp. Warren Petroleum Corp.	y ldo Hatt Hasto	Address Givingdons of Street, Odessa, Arekasia P.O. Box 1689, Lovington, New Mexico	88260
If well produces oil or liquids, give location of tanks.	NO CHANGE	Is gas actually connected? When Yes N/A	
If this production is commingled with th		, give commingling order numbers	
VI. CERTIFICATE OF COMPLIANCE	E	OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations o been complied with and that the information given my knowledge and belief.	or the Oil Conservation Division have ven is true and complete to the best o		19
		TITLE DISTRICT I SUPERVISOR	
Regulatory Coord		This form is to be filed in compliance with RULE If this is a request for allowable for a newly drill well, this form must be accompanied by a tabulation o tests taken on the well in accordance with AULE 11	ed or deepened
(Title)	INACUT	All sections of this form must be filled out completable on new and recompleted wells.	stely for allow-
(Date)		Fill out only Sections I. II. III. and VI for char well name or number, or transporter or other such chang	iges of owner. • of condition.

completed wells.

