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

State of frew infeation 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, Arlesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM \$7410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Dperator					.,,,,,		Well	API Na		1	
	21/						3	0-025-033	324		
Xeric Oil & Gas Compar	<u> </u>										
P. O. Box 51311, Midla	and. Tex	cas 79	9710								
Reason(s) for Filing (Check proper box)	110, 10				Oth	es (Please expla	iin)				
New Well		Change in	Transport	ler of:							
Recompletion	Oil		Dry Gas	Ц		1555	. 4 4	avambam 1	1000\		
Change in Operator X Casinghead Gas Condensate						(Effective November 1, 1989)					
If change of operator give name and address of previous operator	arack Pe	etrole	um Co	., Inc	., 500 V	1. Texas,	Ste.	1485, Mic	lland, T	X 79701	
II. DESCRIPTION OF WELL		SE									
Lease Name					ng Formation			of Lease (Federal)or Fee	_	Lesse No. LC 060881	
South Pearl Queen Unit	t L	15	Pear	1 Quee	<u>en</u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	I LU U	100001	
Location	. 660	1		c	outh	198	یn ₋		West	• .	
Unit Letter N	:000	· · · · · · · · · · · · · · · · · · ·	Feet Pro	m The	outh Lin	2 and bes	F	eet From The _	11000	Line	
Section 4 Township	20- S		Range	35-E	. N	ирм,	Lea			County	
Section 4 Township			Na ilgo			^	.1		ΔÜ		
III. DESIGNATION OF TRAN	SPORTER	OF OI	LAND	NATU	RAL GAS		flitte	d copy of this for	m is so be se	ent)	
Name of Authorized Transporter of Oil	لكنا	or Condens			1			on, Texas		j	
Shell Pipe Line Company Name of Authorized Transporter of Casing		<u> </u>	or Dry C	ins [d copy of this for			
Warren Petroleum Corpon	_	<u> </u>	u <i>D</i> ., u		1	30x 1589	•	, Oklahom			
If well produces oil or liquids,		Sec	Twp.	Rge	ls gas actuall		Whe				
give location of tanks.	J		20-5		Yes		j F	ebruary 1	, 1961		
If this production is commingled with that f	rom any other	r lease or p	ool, give	comming	ing order numb	жт					
IV. COMPLETION DATA					·		·	· · · · · · · · · · · · · · · · · · ·		-c	
Designate Type of Completion	m	Oil Well	G	is Well	New Well	Workover	Decpea	Plug Back	Same Resiv	Diff Res'v	
	Date Compl.	Pandy to 1			Total Depth	<u></u>	l	P.B.T.D.			
Date Spudded	Date Compi.	. Keady W	riou.					F.B. 1.10.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Cas I	hy h		Tubing Depth			
					ì						
						 		Denth Casing	Shoe		
Performices				· · · · · · · · · · · · · · · · · · ·		, , ,		Depth Casing	Shoe		
Perforitions	177	IRING (CASIN	G AND	CEMENTI	NG RECOR	D	Depth Casing	Sho4		
					CEMENTI	NG RECOR	D		Shoe	ENT	
Perforations HOLE SIZE		JBING, (CEMENTI		D		•	ENT	
					CEMENTI		D		•	ENT	
					CEMENTI		D		•	ENT	
HOLE SIZE	CAS	ING & TUE	BING SI		CEMENTI		D		•	ENT	
HOLE SIZE V. TEST DATA AND REQUES	CASI	LLOWA	BING SU	ZE		DEPTH SET		S	ACKS CEM		
HOLE SIZE V. TEST DATA AND REQUES OIL WELL (Test must be after re	T FOR AL	LLOWA	BING SU	ZE	be equal to or	DEPTH SET	wable for th	S.	ACKS CEM		
HOLE SIZE V. TEST DATA AND REQUES	CASI	LLOWA	BING SU	ZE	be equal to or	DEPTH SET	wable for th	S.	ACKS CEM		
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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.