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

## State of New Mexico "nergy, Minerals and Natural Resources Depart" "t

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, Anesia, NM 88210

1000 Rio Brazos Rd., Aziec, NM \$7410  L			OR ALLOWANSPORT C			AS				
Operator					Well API No. 30-025-03325					
Xeric Oil & Gas Company						30-025-03325				
P. O. Box 51311, Midla	and, Te	xas 7	9710			· · · · · · · · · · · · · · · · · · ·				
Reason(s) for Filing (Check proper box) New Well		Change in	Transporter of:	O	ther (Please expl	ain)			!	
Recompletion	Oil Casinghea		Dry Gas Condensate	) ]	(Effe	ctive N	ovember	1, 1989)	)	
L	arack P	etrole	um Co., I	nc., 500	W. Texas	, Ste.	1485, Mi	dland, ]	TX 79701	
II. DESCRIPTION OF WELL	AND LEA					<del></del>		<del></del>		
Lease Name South Pearl Queen Unit				0			of Lease (Fodera) or Fod		<b>мя №</b> 50881	
Location	<u>~1</u>		7 0017 90			L				
Unit LetterK	:165	50	Feet From The	South L	ne and198	<u>80                                    </u>	eet From The	West	Line	
Section 4 Township	20-5		Range 35	<u>۱. E</u>	<u>МРМ,</u>	Lea			County	
III. DESIGNATION OF TRAN	SPORTE	R OF OI	L AND NAT	URAL GAS	In	secti	in l	vell	<u> </u>	
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)										
Shell Pipe Line Company  Name of Authorized Transporter of Casinghead Gas or Dry Gas					P. O. Box 2648, Houston, Texas 77252  Address (Give address to which approved copy of this form is to be sent)					
Warren Petroleum Corporation					P. O. Box 1589, Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.     J   4						7			
If this production is commingled with that f	<b>├</b> ~									
IV. COMPLETION DATA		loune n		- Carantan	1 37. 4	Y	( ~ ~ ~ ~	Company	Digr. D L.	
Designate Type of Completion -		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Kes v	Diff Res'v	
Date Spudded	Date Compt. Ready to Prod.			Total Depth	Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Perforations					<u></u>			Depth Casing Shoe		
TUBING, CASING AND					CEMENTING RECORD					
HOLE SIZE			SING SIZE		DEPTH SET			SACKS CEMENT		
I moom by the AND DEOUES	T FOR A	LOWA	D1 6				1			
V. TEST DATA AND REQUES OIL WELL (Test must be after rec				n be equal to or	exceed top allo	mable for thi	s depth or be f	or full 24 hou	F3.)	
Date First New Oil Run To Tank Date of Test					ethod (Flow, pu	mp, gas lift, i	HC.)			
Length of Test	Tubing Pressure			Casing Press	Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbis.			Water - Bols	Water - Bols.			Gas- MCF		
CAC MICH I	- <del></del>		<del></del>				1			
GAS WELL Actual Prod. Test - MCF/D	CF/D Length of Test				Bbls. Condenssie/MMCF			Gravity of Condensate		
				10	Casing Pressure (Shut-in)			Choke Size		
osting Method (pitot, back pr.)	g Method (pitot, back pr.)  Tubing Pressure (Shut-in)				Casing Pressure (Snus-III)			Cross Size		
/L OPERATOR CERTIFICA						ISERV	ATION !	אואופור	M	
I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above					OIL CONSERVATION DIVISION NOV 1 5 1989					
is true and complete to the best of my knowledge and belief.				Date Approved						
Challe Com					Orig. Signed by					
Signature X and 11 Canas Oldner				∥ By_	By Paul Kautz Geologist					
Printed Name Title				Title						
7/-7-8°/		Telept	kae Na.							

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.