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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., Azzec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Occation		0 111/1	1101	JI (I OIL			``	Well AF	I No.				
Operator Pyramid Energy, Inc.									30-025-03340				
Address	6)							<u> </u>					
14100 San Pe	dro, Su	ite 70	00	Sa	n Antoni			8232					
Reason(s) for Filing (Check proper box)				-	-	(Please expli			r				
New Well	Oil	Change in	Transpor			-	_			eric Oil	1		
Recompletion \square	Company to Pyramid Energy, Inc. effective March 1, 1991.												
Change in Operator X	Casinghead		Conden							2021			
and address of previous operator	Oil &		ompar	ny P	.O. Box 5)1311	Mic	diano	l, Texa	s 79710)		
II. DESCRIPTION OF WELL.	AND LEA		D1 32	and Inches	ng Formation			Kind of	Leare	1	ease No.		
Lease Name South Pearl Queen Uni	-	23		arl (Qu	•			State Federal or Fee		1	5649		
Location			10	arr (y	iceii/	·							
Unit Letter B	: 330		Feet Fro	om TheN	orth Line	ınd1	980	Fce	t From The	East	Line		
9 Section Township	, NMPM, Lea				County								
		0.00.01	Range	D NATEI	DAT CAS	In	at			ill			
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		or Conden		U INA I U	Address (Give			proved a			ent)		
Shell Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1910 Midland, Texas 79702												
	Address (Give address to which approved of P.O. Box 1589 Tulsa,						ent)						
Name of Authorized Transporter of Casing Warren Petroleum	, , , , , , , , , , , , , , , , , , , 												
If well produces oil or liquids, give location of tanks.	Unit D	S∞. 3	Twp. 20S	Rge. 35E		lly connected?		When?		5-12-66			
If this production is commingled with that t	from any other	er lease or	pool, giv	e comming!	ng order numbe	r							
IV. COMPLETION DATA							_,			,			
Designate Type of Completion	- (X)	Oil Well	(Gas Well	New Well	Workover	De	epen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Comp	i. Ready to	Prod.		Total Depth				P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth				
Perforations									Depth Casing Shoe				
Penorauons			,						Depar Casi	ig once			
	T	TIRING	CASI	NG AND	CEMENTIN	G RECOR	₹D						
HOLE SIZE		TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT				
NOLE SIZE	Onding a robing dist												
V. TEST DATA AND REQUES	ST FOR A	LLOW	ABLE					Con elic	damik an ha	for full 24 ho	1		
OIL WELL (Test must be after r	7.		of load	oil and must	Producing Met	bod (Flow n	OWADIE	jor inis	c.)	JUI JUI 24 110	<u> </u>		
Date First New Oil Run To Tank	Date of Te	St.			Licencing Mer	nou (Piow, p	w, p, 8.	~ .y.,	,				
Length of Test	ezite		<u> </u>	Casing Pressure				Choke Size					
Lengui of Test	03270												
Actual Prod. During Test				Water - Bbis.				Gas- MCF					
										<u></u>			
GAS WELL													
Actual Prod. Test - MCF/D					Bbls. Condensate/MMCF				Gravity of Condensate				
Actual Free Feet Free Free Free Free Free Free							· ·						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size					
			T. T 4 2	TOT	١								
VI. OPERATOR CERTIFIC				NCE	C	IL CO	NSE	RV	NOITA	DIVISI	ON		
I hereby certify that the rules and regu Division have been complied with and													
is true and complete to the best of my	knowledge a	nd belief.			Date	Approve	ed		A. 1	* * * * * * * * * * * * * * * * * * * *			
111 9 1					Date	, (pp. 04)		min S	igno., υ y				
Litt Shart					p.,		_	Donl	Kantz				
Signature				·	∥ By_		£5.	Clec	logist				
Scott Graef	Produ	ction	Engi Title	neer			25						
Printed Name	(512)	490-5			Title	<u>.</u>							
Date			ephone l	No.	-					·			

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.