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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 Brizos Rd., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Ι.	T	OTRANS	SPORT OIL	AND NAT	UHAL GA	Well A	DI No		<del></del>	
Operator Pyramid Energy, Inc.						Well A	30-025-03342			
Address	adaa Cu	tes 700	· · · · ·	a Anton	io Torro	s 78232	)			
Reason(s) for Filing (Check proper box)  New Well  Recompletion  Change in Operator		Thange in Tra		Cha	io, Texa f (Please expla inge in o apany to ech 1, 19	m) perator Pyramid	from X			
If change of operator give name	c Oil &	Gas Com	pany P	.O. Box	51311	Midlan	d, Texa	s 79710		
and address of previous operator										
Lease Name	ESCRIPTION OF WELL AND LEASE Name Well No. Pool Name, Including the Pearl Queen Unit 21 Pearl (Queen Unit Pearl Queen Unit Pe				6.			d of Lease No.  Lease No.  LC065649		
Location  Unit LetterD	_ :330	330 Feet From The North Line and 660 Feet From The West								
Section 10 Townsh	NMPM, Lea County									
III. DESIGNATION OF TRAI	NSPORTER	OF OIL	AND NATU	RAL GAS	-thy	ectro	n we		<del></del>	
Name of Authorized Transporter of Oil		or Condensate		Address (Giv	e address to Wi				nı)	
Shell Pipeline Company					P.O. Box 1910 Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas				Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589 Tulsa, OK 74102  Is gas actually connected? When?						
If well produces oil or liquids, give location of tanks.	Unit		vp.   Rge. SOS   35E	-		1 THEEL		12-66		
If this production is commingled with that	t from any othe	r lease or poo	l, give commingl	ing order num	ber:					
IV. COMPLETION DATA		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion  Date Spudded		Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations							Depth Casin	Depth Casing Shoe		
	T	IIBING C	ASING AND	CEMENTI	NG RECOR	D D				
HOLE SIZE		CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
					1					
		<del></del>								
V. TEST DATA AND REQUI	EST FOR A	LLOWAR	LE load oil and mus	t be equal to o	r exceed top all	owable for th	is depth or be	for full 24 hou	ers.)	
Date First New Oil Run To Tank					Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	Tubing Pre	Tubing Pressure			Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbis.			Gas- MCF		
GAS WELL										
Actual Prod. Test - MCF/D	Length of	Test	· .	Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pre	essure (Shut-in	1)	Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIED I hereby certify that the rules and re Division have been complied with a is true and complete to the best of n	gulations of the nd that the info	Oil Conserva rmation given	tion		OIL CO	ed	W	DIVISION		
Signature Scott Graef Production Engineer				By Paul Kautz Geologist						
Scott Graef Printed Name		490-50	Гіце 100	Titl	:		<del></del>			
Date	<del></del>		hone 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.