Submit 5 Copies	• Sta	te of New Mexico				
Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 8824	Energy, Minerals a	nd Natural Resources Depa	rument	Form C-104 Revised 1-1-89 See Instructions		
DISTRICT II P.O. Drawer DD, Artesia, NM 88	OIL CONSE	RVATION DIVISION at Bottom o				
DISTRICT III	Santa Fe. No	ew Mexico 87504-2088				
1000 Rio Brazos Rd., Aztec, NM	REQUEST FOR ALLC	WABLE AND AUTHO				
I. Operator	TO TRANSPOR	COIL AND NATURAL	GAS			
Pyramid Energy			Well API No.			
Address		· · · · · · · · · · · · · · · · · · ·		409		
Reason(s) for Filing (Check proper	Place, Ste. 210 San Ant box)	tonio, Texas 7	8216			
New Well	Change in Transporter of	C Other (Please exp	olain)			
Change in Operator	Oil Dry Gas Casinghead Gas Condensate					
If change of operator give name and address of previous operator			·			
II. DESCRIPTION OF WE	T.I. AND I PACE					
Lease Name	Well Mr. In Ash	cluding Formation	Kink of Lease			
East Pearl Que		(Queen)	State, Federal or Fee	<b>Lease No.</b> E=5887		
Unit Letter K		South 13	25			
	· · ·	Line and	Feet From The	WestLine		
	C Kange	35E NMPM,	Lea	County		
III. DESIGNATION OF TR Name of Authorized Transporter of C	ANSPORTER OF OIL AND NA	TURAL GAS				
EOTT Oil Pipeli	Line Company Effective 4	Delinted de (Give address to w	hich approved copy of this form i	s to be sent)		
Name of Authorized Transporter of C Warren Petroleu	asinghead Gas	Address (Give address to w	Houston, Texas	77010		
If well produces oil or liquids		DOX 1389	<u>1115a, OK</u> 74102			
rive location of tanks.	F 27 195 3	ge. Is gas actually connected? 5E Yes	When ?			
V. COMPLETION DATA	hat from any other lease or pool, give comm	ingling order number:				
Designate Type of Completie	on - (X) Oil Well Gas Well	New Well Workover	Deepen   Plug Back   Same	Res'v Diff Res'v		
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	<u>İ ·</u>		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay				
erforations		TOP OID OIL PAY	Tubing Depth			
			Depth Casing Shoe			
	TUBING, CASING AN	D CEMENTING RECORD	l			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		CEMENT		
		•				
TEST DATA AND REQUI	ST FOR ALLOWABLE					
IL WELL (Test must be after the First New Oil Run To Tank	recovery of total volume of load oil and mu	st be equal to or exceed top allow	able for this depth or be for full ;	24 hours.)		
the First New On Kun 10 1805	Date of Test	Producing Method (Flow, pump	p, gas lift, etc.)			
ngth of Test	Tubing Pressure	Casing Pressure	Choke Size			
tual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF			
AS WELL		<u> </u>				
tual Prod. Test - MCF/D	Length of Test	Bbis. Condensate/MMCF				
		BUIL CONCENSION MINICF	Gravity of Condensa	le		
ting Method (pitot, back pr.)		Casing Pressure (Shut-in)	Choke Size			
· · ·	Tubing Pressure (Shut-in)					
		lp				
. OPERATOR CERTIFIC	CATE OF COMPLIANCE	OIL CONS		SION		
OPERATOR CERTIFIC	CATE OF COMPLIANCE		ERVATION DIVIS 0V 2 9 1993	SION		
OPERATOR CERTIFIC	CATE OF COMPLIANCE	OIL CONS Date Approved	ERVATION DIVIS 0V 2 9 1993	SION		
. OPERATOR CERTIFIC I hereby certify that the rules and regul Division have been complied with and is true and complete to the best of my the Acoth Signature	CATE OF COMPLIANCE lations of the Oil Conservation that the information given above knowledge and belief:	Date Approved	OV 2 9 1993	SION		
. OPERATOR CERTIFIC I hereby certify that the rules and regul Division have been complied with and is true and complete to the best of my the Acoth Signature Scott Graef	CATE OF COMPLIANCE lations of the Oil Conservation that the information given above knowledge and belief. Production Engineer	Date Approved By ORIGINAL SIGN	ERVATION DIVIS	SION		
. OPERATOR CERTIFIC I hereby certify that the rules and regul Division have been complied with and a true and complete to the best of my the Acoth Signature	CATE OF COMPLIANCE lations of the Oil Conservation that the information given above knowledge and belief:	Date Approved	OV 2 9 1993	SION		

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.

All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.

Submit 5 Copies State Appropriate District Office Energy, Minerals and DISTRICT I P.O. Box 1980, Hobbs, NM 88240					f New Mexic Natural Reso	Form C-104 Revised 1-1-89 See Instructions					
P.O. DOX 1980, HOBDE, NM 88240 <u>DISTRICT II</u> P.O. Drawer DD, Antesia, NM 88210	OIL CONSERVATION DIVISION P.O. Box 2088						ON	See Instructions at Bottom of Pag			
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 874	10		Santa Fe, I	New	Mexico 87						
Ι.	RE	UEST I TO TF	FOR ALL ANSPO	.OW	ABLE AND	AUTHOR		I			
Openior Pyramid Energy,	Tra			<u> </u>		ATONAL G		API No.			
Address				<u> </u>	·			30-025-	-23409		
10101 .Reunion P. Reason(s) for Filing (Check proper box	lace, S	te. 21(	) <u>San A</u>	intor	nio, Texa	1 <u>8 , 7</u> 8	216				
New Well  Recompletion  Change in Operator	Oil	Change	in Transporte Dry Gas Condensat		ט <u>ו</u> ו	her (Please expl	ain)				
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL	L AND LI	EASE				· ·			·		
Lesse Name East Pearl Queen		Well No.			ding Formation			of Lease		Lease No.	
Location	· contac	57	<u>Pea</u> :	<u>rl (</u>	Queen)			Federal or Fe	E E-	5887	
Unit Letter K	_;;		_ Feet From	The _	South Li	e and	5 F	eet From The	West	Line	
Section 34 Towns		.95	Range		35E . N	MPM,	L	ea		County	
II. DESIGNATION OF TRAI	NSPORT	<u>ER OF O</u>	IL AND I	NATI	URAL GAS						
Name of Authorized Transporter of Oil EOTT Oil Pipelin		or Conder	isate	כ	Address (Gin	e address to whi					
Name of Authorized Transporter of Casis Warren Petroleum	singhead Gas X or Day Gas				Address (Give address to which approv			CON, Texas 77210-4666 end copy of this form is to be sent) a, OK 74102			
f well produces oil or liquids, ve location of tanks.	Unit F	Unit Sec. Twp. Ree is gas achually connected?						When ?			
this production is commingled with that	from any of	ser lease or				Her;					
V. COMPLETION DATA		Oil Well									
Designate Type of Completion		İ	i		Total Depth	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
• • • • • • • • • • • • • • • • • • •		Date Compl. Ready to Prod.						P.B.T.D.			
vations (DF, RKB, RT, GR, etc.) Name of Producing Formation				_	Top Oil/Gas Pay			Tubing Depth			
erforations	_l			<u></u>	<u> </u>			Depth Casing	shoe		
	<u>์</u> ๆ	TIRING	CASING		(TE) (E) 1771)	0.00000					
HOLE SIZE	CA	SING & TU	BING SIZE	AND	D CEMENTING RECORD			SACKS CEMENT			
	<u> </u>	—,									
TECT DAMA AND STATES								· · · · ·			
I LOI DATA AND REQUES	T FOR A	LLOWA	BLE					·····			
LWELL (Test must be after re	covery of tot	al volume oj		t must i	be equal to or e	xceed top allows	ble for this a	depth or be for	r full 24 hours	r.)	
LWELL (Test must be after re		al volume oj		t must	be equal to or e Producing Met	xceed top allowa xod (Flow, pump	ble for this of gas lift, etc	depth or be for	r full 24 hours	r.)	
IL WELL (Test must be after re the First New Oil Run To Tank	covery of tot	<mark>al volume oj</mark> L			be equal to or e Producing Met	od (Flow, pump	, gas lift, etc	depth or be foi .) Choke Size	r full 24 hours	s.)	
IL WELL (Test must be after re the First New Oil Run To Tank mgth of Test	Date of Tes	<mark>al volume oj</mark> L			Producing Met	od (Flow, pump	, gas lift, etc	.)	r full 24 hours	r.)	
L WELL (Test must be after re the First New Oil Run To Tank ngth of Test tual Prod. During Test	Date of Tes Tubing Pres	<mark>al volume oj</mark> L			Producing Meth	od (Flow, pump	, gas lift, etc	.) Choke Size	r full 24 hours	r.)	
L WELL (Test must be after re te First New Oil Run To Tank ngth of Test tual Prod. During Test AS WELL	Date of Tes Tubing Pres	al volume oj t			Producing Meth	xod (Flow, pump	, gas lift, etc	.) Choke Size Gas- MCF		F.)	
L WELL (Test must be after re te First New Oil Run To Tank ngth of Test tual Prod. During Test AS WELL ual Prod. Test - MCF/D	Covery of tot Date of Tes Tubing Pres Oil - Bbls.	al volume oj t sure	f load oil and		Producing Meth Casing Pressure Water - Bbls. Bbls. Condensa	od (Flow, pump	, gas lijî, etc	Choke Size Gas- MCF Gravity of Cor		r.)	
L WELL (Test must be after re te First New Oil Run To Tank ngth of Test tual Prod. During Test AS WELL ual Prod. Test - MCF/D	Covery of tot Date of Teg Tubing Pres Oil - Bbis.	al volume oj t sure	f load oil and		Producing Meth Casing Pressure Water - Bbls.	od (Flow, pump	, gas lijî, etc	.) Choke Size Gas- MCF		r.)	
IL WELL (Test must be after re the First New Oil Run To Tank ingth of Test tual Prod. During Test AS WELL tual Prod. Test - MCF/D ting Method (pitot, back pr.) . OPERATOR CERTIFICA I hereby certify that the rules and regulat Division have been complied with and th	Covery of tot Date of Tes Tubing Pres Oil - Bbis. Length of Th Tubing Press ATE OF ( ions of the O at the inform	al volume oj t sure est est COMPL il Conservat ation given	(load oil and		Producing Meth Casing Pressure Water - Bbls. Bbls. Condensa Casing Pressure	iod (Flow, pump io/MMCF (Shut-ia)	, gas lijî, etc	Choke Size Gas- MCF Gravity of Cor Choke Size	ndensate		
IL WELL (Test must be after re the First New Oil Run To Tank ingth of Test itual Prod. During Test AS WELL itual Prod. Test - MCF/D iting Method (pitot, back pr.) COPERATOR CERTIFICA I hereby certify that the rules and regulat Division have been complied with and th is true and complete to the best of my kn Atot Hace	Covery of tot Date of Tes Tubing Pres Oil - Bbis. Length of Th Tubing Press ATE OF ( ions of the O at the inform	al volume oj t sure est est COMPL il Conservat ation given	(load oil and		Producing Metl Casing Pressure Water - Bbls. Bbls. Condensa Casing Pressure Ol Date A	e/MMCF (Shut-in) L CONS	ERVA 0V 29	Choke Size Sas- MCF Gravity of Cos Choke Size TION D 1993			
TEST DATA AND REQUES IL WELL (Test must be after re- ate First New Oil Run To Tank Ength of Test Stual Prod. During Test AS WELL tual Prod. Test - MCF/D ting Method (pitot, back pr.) I. OPERATOR CERTIFICA I hereby certify that the rules and regulat Division have been complied with and the is true and complete to the best of my known Alto Harof Signature Scott Graef Printed Name 16. 193	Covery of tot Date of Tes Tubing Pres Oil - Bbls. Length of Th Tubing Pres ATE OF ( ions of the O at the inform lowledge and Produ	al volume of t sure est complation given belief:	(load oil and (load oil and )) IANCE ion above <u>Enginee</u> ille		Producing Metl Casing Pressure Water - Bbls. Bbls. Condensa Casing Pressure Ol Date A	ie/MMCF (Shut-ia) L CONS	ERVA 0V 2 9	Choke Size Gas- MCF Gravity of Cor Choke Size TION D 1993			

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