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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Pyramid Energy, Inc.	Well API No. 30-025-30868
Address 14100 San Pedro #700, San Antonio, Tx 78232	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name West Pearl Queen Unit	Well No. 180	Pool Name, including Formation Pearl Queen	Kind of Lease (State) Federal or Fee	Lease No. E-8183
Location Unit Letter <u>K</u> : <u>2630</u> Feet From The <u>South</u> Line and <u>2630</u> Feet From The <u>West</u> Line Section <u>28</u> Township <u>19S</u> Range <u>35E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Shell Pipeline Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1910, Midland, Tx 79702	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Corp. Phillips 66 Natural Gas Co., GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589, Tulsa, OK 74102 001 Penbrook, Odessa, Tx 79762	
If well produces oil or liquids, give location of tanks.	Unit <u>B</u> Sec. <u>32</u> <u>19S</u> <u>35E</u>	When? <u>February 1, 1992</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 5-17-90	Date Compl. Ready to Prod. 6-11-90		Total Depth 5075		P.B.T.D. 5035			
Elevations (DF, RKB, RT, GR, etc.) 3722' GR	Name of Producing Formation Queen		Top Oil/Gas Pay		Tubing Depth 4925			
Perforations 4713-4921					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		415'		250 sx Circ 102 Sx			
7-7/8"	5-1/2"		5075'		1040 sx Circ 180 sx.			
	2-7/8"		4925					

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank 6-14-90	Date of Test 6-26-90	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size 16/64
Actual Prod. During Test	Oil - Bbls. 26	Water - Bbls. 207	Gas- MCF 11

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Bonnie Atwater
Signature
Bonnie Atwater Agent
Printed Name
7-2-90 Title
Date 915/685-0878 Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 03 1990
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
Title

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.