

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-78

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NAME OF OPERATOR	
REGISTRATION	
LAND OFFICE	
TRANSPORTER	
OPERATION	
REGISTRATION OFFICE	

Operator
CITATION OIL & GAS CORPORATION

Address
16800 GREENPOINT PARK DRIVE-SOUTH ATRIUM, SUITE 300, HOUSTON, TEXAS 77060-2304

Reason(s) for filing (Check proper box)

New Well	☐	Change in Transporter of:		Other (Please explain)	
Accomplishment	☐	Oil	☐	Dry Gas	☐
Change in Ownership	☒	Condensate Gas	☐	Condensate	☐

If change of ownership give name and address of previous owner: **SHELL WESTERN E&P INC., P. O. BOX 576, HOUSTON, TEXAS 77001**

DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Foot Name, including Formation	Kind of Lease	Lease
STATE M	8	EUMONT YATES 7 RIVERS QUEEN	State, Federal or Fee	STATE

Location

Unit Letter **B** : **914** Feet From The **North** Line and **2340** Feet From The **East**

Line of Section **01** Township **21S** Range **35E** N.M.P.M. **Lea** Co.

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorize Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
SHELL PIPELINE CORPORATION	P. O. BOX 1910, MIDLAND, TEXAS 79702
Name of Authorize Transporter of Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
PHILLIPS 66 NATURAL GAS COMPANY - GPM Gas Corporation	P. O. BOX 5050, BARTLESVILLE, OK. 74004

If well produces oil or liquids, give location of tanks. **NO CHANGE**

Is gas actually compressed? **Yes** **NA**

COMPLETION DATA

Designate Type of Completion - (X)

Oil well	Gas well	New well	Workover	Surge	Plug Back	Some Revers.	Drill H
☒	☐	☐	☐	☐	☐	☐	☐

Date Spurred	Date Compl. Ready to Prod.	Casing Depth	2375
Drillings (DF, RRE, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

(Test must be after recovery of total volume of lead oil and must be equal to or exceed 100 c for this depth or be for full 24 hours)

Date First New Oil Ran To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Casing Size
Actual Prod. During Test	Oil-Bbls.	Water-Bbls.	Gas-MCF

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Producing Method (pump, back pr.)	Tubing Pressure (Start-End)	Casing Pressure (Start-End)	Casing Size

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.

Debra Harris
(Signature)
Production Coordinator
(Title)
1/20/87; effective 12/1/86
(Date)

OIL CONSERVATION DIVISION

APPROVED **FEB 6 1987**, 19

BY **ORIGINAL SIGNED BY JERRY SEXTON**

TITLE **DISTRICT I SUPERVISOR**

This form is to be filled in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filled for each point in multi-completed wells.

RECEIVED
FEB 4 1987
HONOLULU OFFICE