

OIL CONSERVATION DIVISION

P. O. BOX 2008

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-1-76REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1. 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 ☐Accomplishment ☐Change in Ownership ☒

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

If change of ownership give name
and address of previous owner

SHELL WESTERN E&P INC., P. O. BOX 576, HOUSTON, TEXAS 77001

2. DESCRIPTION OF WELL AND LEASE

Lease Name STATE H	Well No. 34	Pool Name, Including Formation EUMONT YATES 7 RIVERS QUEEN	Kind of Lease State, Federal or Fee STATE	Lease #
Location Unit Letter H : 2310 Feet From The North Line and 990 Feet From The East				
Line of Section 13 Township 21S Range 35E, NMPM, Lea				

3. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized 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 Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
PHILLIPS 66 NATURAL GAS COMPANY ☒ Effective February 1, 1992	BOX 5050, BARTLESVILLE, OK. 74004
If well produces oil or liquids, give location of tanks.	Is gas actually connected? when
NO CHANGE	Yes NA

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

4. COMPLETION DATA

Designate Type of Completion - (X)		Oil well	Gas well	New well	Workover	Deepen	Plug Back	Scale Remov.	Drill Re
Date Spudded	Date Compl. Ready to Prod.	Total Depth		FEET.					
Entrances (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth					
Perforations		Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT					

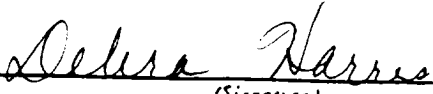
5. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL(Test must be after recovery of total volume of lead oil and must be equal to or exceed top oil
able for this depth or be for full 24 hours)

Date First New Oil Ran To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke 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
Testing Method (first, back pr.)	Tubing Pressure (Shot-In)	Casing Pressure (Shot-In)	Choke Size

6. 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.
(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
DISTRICT I SUPERVISOR

TITLE

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

If this is a request for allowable for a newly drilled or deepen
well, this form must be accompanied by a tabulation of the deviat:
tests taken on the well in accordance with RULE 111.All sections of this form must be filled out completely for allo
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 conditi:Separate Forms C-104 must be filed for each pool in multi;
completed wells.