## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTE		•	
BANTA FE			-
FILE		-	
U.8.G.4.			
LAND OFFICE			•
TRANSPORTER	DIL		
	GAG		
OPERATOR			1
PERMATION OFFICE			1

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

<u>I.</u>							
Operator							
Petrus Oil Company,	L. P.						
Address							
12201 Merit Drive,	Suite 90	001	Dallas, Texa	is 75251-2	2293		
Reason(s) for filing (Check proper box)			Other	(Please explain	,		
New Well	Change in	Transporter of:		FCC+	07 01 07		
Recompletion	o.i	ء 🔲 -	ry Gas	Effecti	ve 03-01-87		
Change in Ownership	Casin	gh <del>ead</del> Gas 🔲 C	ondensate				
					<del></del>		
If change of ownership give name and address of previous owner Amo	co Produ	ction Company	P. O. Box	68, Hobbs.	NM 88240		
and address of previous owner			<del> </del>		······································	<del></del>	
II. DESCRIPTION OF WELL AND I	EASE		•				
Lease Name		Pool Name, Including F	ormation	Kind of	Legse	Lease No.	
Pike Federal	1	Blineba	м	State, F	•deral or Fee Federal		
Location			1			—	
Unit Letter A 330	S S	The Morth Li	73	<i>-</i>	· Soft		
Unit Letter;	restrion	1 1 He 3 702 3040 LI	10 and		rom the	<del></del>	
Line of Section 6 Townsh	23-5 ما	S Range	38-E	, NMPM,	Lea	County	
Eine of Section 0 Towns	·	Nonge	30 2	, IMPM,	200	County	
III. DESIGNATION OF TRANSPOR	TED OF O	JI ANIN NATIDAI		ST			
Name of Authorized Transporter of Cil		ndensate		ddress to which	approved copy of this form is	to be sent!	
, , , , , , , , , , , , , , , , , , ,						,	
Name of Authorized Transporter of Casings	ead Gas	or Dry Gas	Address (Give a	ddress to which	approved copy of this form is	to be sensi	
Trans of Advisorate Transporter of County		u. 3., 444				,	
Un	it Sec.	Twp. Rge.	Is gas actually a	ennected?	When		
If well produces oil or liquids,	11 , 500.	, twp. , Age.	is das actually c	.Billiected r	1		
give location of tanks.	<del></del>	<u> </u>	1		<del></del>	<del></del>	
If this production is commingled with the	at from any	other lease or pool,	give comminglin	g order number			
NOTE: Complete Parts IV and V or		la if nacaecam					
NOTE: Complete Paris IV and V Or	reverse sic		11				
VI. CERTIFICATE OF COMPLIANCE	3		11 (	OIL CONSER	VATION DIVISION		
VI. CERTIFICATE OF COMMENCE.	•		11.	Ť . *	· · · · · · · · · · · · · · · · · · ·		
I hereby certify that the rules and regulations of		_	APPROVED	<u>4</u> <u> </u>	<u> </u>	, 19	
been complied with and that the information gr	ven is true and	complete to the best of		ADDIZINAL C	IRNER OV JERNY CEVNO		
my knowledge and belief.		BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR					
			TITLE	וכוע	KICL L 2015KAISOX		
Lu an II ala	Suzann	Jourdan	This form	n is to be filed	in compliance with RUL	E 1104.	
Sugar Jourdan					allowable for a nawly dril		
(Signature)					empanied by a tabulation of		
Regulatory Coordinator			tests taken on the well in accordance with RULE 111.  All sections of this form must be filled out completely for allow-				
(Title)			able on new	ind recomplete	d weils.	erery for miles	
03-30-87			Fill out only Sections I, II, III, and VI for changes of owner.				
(Date)			well name or r	umber, or trans	porter, or other such chan	of condition.	
			Separate completed well	Forms C-104	must be filed for each p	ool in multiply	