Submit 5 Copies Appropriate Definite DISTRECT]		State of Nev ergy, Minerals and Natur	Form C-104 Revised 1-1-89 See Instructions at Bottom of Page	
P.O. Box 1980, Hobbs, NM 88240	C	IL CONSERVAT		
P.O. Drawer DD, Aresia, NM 88210 DISTRICT III	Santa Fe, New Mexico 87504-2088			58287
I REQUEST FOR ALLOWABLE AND AUTHORIZATION I. TO TRANSPORT OIL AND NATURAL GAS				
Uperator Well API No.				
Citation Oil & Gas Corp. 30-025-26557				
Address 8223 Willow Place South Ste 250 Houston, Texas 77070-5623				
Reason(s) for Filing (Check proper bax) Other (Please explain) New Well Change in Transporter of:				
Recompletion Dil Dry Gas U				
Change in Operator	Casinghead	Gas X Condensate		1, 1991
and address of previous operator				
II. DESCRIPTION OF WELL		SE Well No. Pool Name, Includin	a Formation	Kind of Lease Lease No.
Pawnee Deep Unit		1 Pawnee (Size, Rodding XXX Rox LG 3340
Location				N.C.A.
Unit Letter F	:) Feel From The <u>NC</u>	orth line and 2310	Feet From The West Line
Section 22 Township	265	Range 36E	, NMPM,	Lea County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil Enron Oil Trading & Th	X_			ston, Texas 77251-1188
Name of Authorized Transporter of Casing	head Gas	X or Dry Gas	Address (Give address to which a First City Bank Tower,	pproved copy of this form is to be send) 201 Main St. Fort Worth, Texas
Sid Richardson Carbon			Is gas actually connected?	
Eve location of tanks.	F	22 265 j 36E	Yes	5-1-80
If this production is commingled with that I IV. COMPLETION DATA SIL	D RICHA	ir lease or pool, give commingli \RDSON GASOLIN	ng order number.	
:		Oil Well Gas Well		Deepen Plug Back Same Res'v Diff Res'v
Designate Type of Completion		Ready to Prod	Total Depth	P.B.T.D.
Date Spudded Date Compl. Ready to Prod.				1.5.1.5.
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay	Tubing Depth
20012-2013				Depth Casing Shoe
TUBING, CASING AND CEMENTING RECORD				
HOLE SIZE	IZE CASING & TUBING SIZE		DEPTH SET	SACKS CEMENT
V. TEST DATA AND REQUES	T FOR A	LLOWABLE		······································
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	Date of Tes	:	Producing Method (Flow, pump,	Eas 15, 21C.)
Length of Tes	Tubing Pressure		Casing Pressure	Choke Size
Actual Prod. During Test	Oil • Bbls.		Water - Bbis	G25- MCF
			1	1
GAS WELL	Length of T	esi	Bbls. Condensate/MMCF	Gravity of Condensate
Essing Method (pilox, back pr.)	Tubiog Pressure (Snui-in)		Casing Pressure (Snul-10)	Choke Size
VI. 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	ations of the that the infor	Oil Conservation mation given above	11 .	ERVATION DIVISION NOV 1 8 1991
Sharm. E	W	nd	Date Approved	
Signature Sharon Ward Prod.	Regulat	cory Supv	By	
Printed Name November 1, 1991 (713)-469-9664 Date Telephone No.				
Dale Telephone No.				

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.