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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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

1.	<u></u>	UINA	NOFC	JA I OIL	- AND NA	TUNAL G					
Operator DEFERENCE OF A COMPANY A P								Well API No.			
PETRUS OIL COMPANY	Y, L.P.										
12377 Merit Drive	STE.	1600. 1	Dalla	s. Tex	as 75251	Į					
Reason(s) for Filing (Check proper box)	<u>, </u>					et (Please expl	ain)				
New Well		Change in	-								
Recompletion	Oil		Dry Gas								
Change in Operator X	Casinghead	i Gas	Condens	sate			···				
If change of operator give name and address of previous operator Moh	oil Prod	ducing	Texa	s & Ne	w Mexico	o Inc. (I	Effectiv	<u>e date</u>	<u>7-1-89)</u>		
II. DESCRIPTION OF WELL	AND LEA		,=								
Lease Name Well No. Pool Name, Includi							Kind	Kind of Lease State, Federal or Fee		Lease No.	
Humphrey Queen Unit: Location		18	Lang	lie Ma	ttix 7 R	ivers Qu	een sale,	receral or rea	E		
Unit Letter I : 2310 Feet From The South Line and 99							0 Fe	et From The	East	Line	
Section 3 Township 25-S Range 37-E								Le	a	County	
III. DESIGNATION OF TRAN	SPORTE			NATU			· · · · · · · · · · · · · · · · · · ·		 		
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Male il Company Alel Lie Posson TV 75221											
Mobil Oil Company Acel Name of Authorized Transporter of Casing	P. O. Rox 900, Dallas, TX 75221 Address (Give address to which approved copy of this form is to be sent)										
El Paso Natural Gas Con	Box 1492, El Paso, TX 79978					nt)					
If well produces oil or liquids,	npany Unit Sec. Twp. Rge.					y connected?	aso TX When				
give location of tanks.	F&K 3 25S 37E				Yes	-		known			
If this production is commingled with that i	from any other	er lease or p	pool, give	comming							
IV. COMPLETION DATA											
Designate Type of Completion	- (X)	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations					Depth Casing Shoe						
10.000								Depui Casin	ig Shoe		
	T	UBING.	CASIN	IG AND	CEMENTI	NG RECOR	D	1			
HOLE SIZE CASING & TUBING SIZE					DEPTH SET			SACKS CEMENT			
I TOOK DATE AND DECLIC	TOD A	LLOW	DIE	-							
V. TEST DATA AND REQUES				:1 am da	h			- 44 1	C C. !! 24 !	\	
OIL WELL (Test must be after re Date First New Oil Run To Tank	,		oj ioaa oi	u ana musi	, ' 				for Juli 24 hou	rs.)	
e First New Oil Run To Tank 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 - Bbis.			Gas- MCF			
										"	
GAS WELL											
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
Tortion Mathed (cites book as)	Tubing Process (Short in)							Challes Ciae	Choke Size		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Cloke Size			
VI. OPERATOR CERTIFIC	ATE OF	COMP	LIAN	CE							
I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above					JUL 1 0 1989						
is true and complete to the best of my knowledge and belief.					Date	Approve	d	OUL .	T 0 100		
Dan malland											
Signature					By_				D BY JERR		
Signature (/ <u>Dora McGough Regulatory Coordinator</u>					-, -			DISTRICT I	SUPERVIS	UR	
Printed Name			Title		Title		**.				
June 30,1989	21	4/788-	3378 phone No								
		I etel	HINDE IAC	<i>)</i> .	Н						

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.

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