

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form O-104
Revised 10-1-78

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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AA ENERGY CORPORATION

1500 FIDELITY UNION TOWER, DALLAS, TEXAS 75201

Reason(s) for filing (Check proper box)	Other (Please explain)
Change in well ☐	Establish scheduled production allowable following re-entry of TA'd well.
Change in completion ☐	
Change in ownership ☐	
Change in transporter of: Oil ☐ Dry Gas ☐	
Casinghead Gas ☐ Condensate ☐	

Change of ownership give name
Address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name TOBY	Well No. 1	Pool Name, including Formation LANGLIE-MATTIX	Kind of Lease State, Federal or Fee FEE	Lease No.
Depth L 1980	Feet From The SOUTH	Line and 629	Feet From The WEST	
Line of Section 7	Township 24S	Range 37E	NMPM,	LEA County

TRANSPORTER OF OIL AND NATURAL GAS

Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent) BOX 3237, ABILENE, TEXAS 79604
PRIDE PIPELINE COMPANY	
Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Is gas actually connected? ☐	When ☐
NO	TSTM

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

Perforate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Shut Resv.	Diff. Resv.
Date Compl. Ready to Prod.	Total Depth	P.B.T.D.						
Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth						
Depth Casing Shoe								

ILLEGIBLE

HOLE SET AND CEMENTING RECORD

DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE (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)

First New Oil Run To Tanks 11-23-81	Date of Test 12-3-81	Producing Method (Flow, pump, gas lift, etc.) Pump	
Test Duration 24 Hrs	Tubing Pressure 30 psi	Casing Pressure 30 psi	Choke Size Open
Oil Prod. During Test 48 bbls.	Oil-Bbls. 15 bbls.	Water-Bbls. 33 bbls.	Gas-MCF TSTM

Oil Prod. Feet-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Shut-in Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

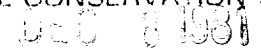
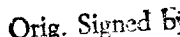
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


Basin Oil Consultants, Inc.

12-7-81

(Date)

OIL CONSERVATION DIVISION

APPROVED  12BY 
Les Clements
TITLE Oil & Gas Insp.

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

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

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

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

Separate Forms O-104 must be filed for each pool in multi-completed wells.