Form C-104 Revised 10-1-78

NERGY AND MINERALS DEPARTMENT

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99. 60 100×15 5411	1000	
DISTRIBUTION		
BANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	DIL	
	8 A5	
OPERATOR.		
PRORATION OF	NC E	 _

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

ı.	TRANSPORTER DIL OPERATOR PROGRATION OFFICE	REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
	Citation Oil & Gas Corp.					
	16800 Greenspoint Park Drive Suite 300 South Atrium, Houston, TX 77060-2304					
	Reason(s) for filing (Check proper box New Well	Change in Transporter of:	Other (Pleas	re explain)		7 - 1- 1
	Recompletion Change in Ownership(Y)	Oil Dry (Gas			
	If change of ownership give name and address of previous owner	Shell Western E&P, Inc	., P.O. Rox 991	, Houston	TX 77001	
I.	DESCRIPTION OF WELL AND					
	State B Com	Well No. Pool Name, including 2 Custer	Formation Ellenburger -	Kind of Leas State, Federa	STATE	Lease No.
		50 Feet From The South L	ine and <u>1980</u>	Feet From '	The East	
	Line of Section 36 To	enship 245 Range	36E , NMPI	4,	Lea	County
ı. ˌ	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS			
	Western Oil Transporter of Oil	or Condensate			ved copy of this form is a	io be sent)
	Name of Authorized Transporter of Car El Paso Natural Gas Co	singhead Gas ar Dry Gas	Address (Give address	to which approx	ved copy of this form is	o be sens)
	If well produces oil or liquids, give location of tanks,	Unit Sec. Twp. Ree.	P.O. Box 1492		m	
1	If this production is commingled wit	NO CHANGE:	Yes	r number	N/A	· · · · · · · · · · · · · · · · · · ·
ٔ ا	COMPLETION DATA	Oil Wall Gos Wall	New Well Workover	Deepen	Plug Back Same Res	'v. Diff. Res'y
-	Designate Type of Completio	n - (X) Date Compl. Ready to Prod.			1	
		Date Compt. Ready to Prod.	Total Depth		P.B.T.D.	
Elevations (DF, RKB, RT, GR, esc.; Name of Producing Formation			Top Oll/Gas Pay		Tubing Depth	
	Perforations Depth Casing Shoe					
TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT						
-			DEPTH SI		SACKS CEM	ENT
\vdash						
					<u> </u>	
_(rest data and request fo DIL Well		ifter recovery of total volu spik or be for full 24 hours	me of load oil a	ind must be equal to or e	zecoć top allow
ľ	Date First New Oil Run To Tanks	Date of Teet	Producing Method (Flow	, pump, gas lift	, ste.)	**************************************
Γ	Lorigth of Toot	Tubing Pressure	Casing Pressure		Choke Size	
[Actual Prod. During Tool	Oil-Bhis.	Water - Bhis.		Gas • MCF	
`-	AS WELL		<u> </u>			
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	•	Gravity of Condensate	
7	Feeting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-	·im)	Choke Size	
C	ERTIFICATE OF COMPLIANCE	Ε	01, 66	NICED (A TI		
		ortify that the rules and regulations of the Oil Conservation are been complied with and that the information given		9		
ab	shove is true and complete to the best of my knowledge and belief.		ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR			
	TITLE					
	Alura Narra This form is to be filed in compliance with RULE 1104. [Signature] [Signature]			l en donamanad		
Froduction Clerk			well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
	7/22/86; Effective 7/1	/86	ante on new and seco	published mell	be filled out complete a. III, and VI for chang	
	(Date)	,	well name or number,	or transporter,	III, and VI for change or other such change	of sondition

Separate Forms G-104 must be fitted for each pool in multiply completed wells:

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OIL CONSERVATION DIVISION

P. O. BOX 2088

ENE	RGY AND MINER	ALS D	EPA	ATRI	MENT
		1740			
	DISTRIBUTION				
	SANTA FE				
	FILE				
	U.S.G.S. LAND OFFICE				
	TRANSPORTER	DIL			
		GAS			
	OPERATOR		_		
I.	PADRATION OFFICE				
	Operator				

7/22/86; Effective 7/1/86

	FILE	SANTA FE, NE	W MEXICO 87501			
	LAND OFFICE REQUEST FOR ALLOWABLE					
	TRANSPORTER GAS AND OPERATOR AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
1.	Operator OFFICE	PRORATION OFFICE				
	Citation Oil & Gas	Corp.				
	16800 Greenspoint P. Reoson(s) for filing (Check proper box	ark Drive Suite 300 Sout		060-2304		
	New Well	Change in Transporter of:	Other (Please explain)			
	Recompletion Change in Ownership(Y)	Oil Dry G	Gas			
	If change of ownership give name					
,	and address of previous owner	Shell Western E&P. Inc	P.O. Box 991, Houston	TX 77001		
Ш	DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including	Formation Kind of Lea	Lease No.		
	State B Com	2 Custer Devoni	· · · · · · · · · · · · · · · · · · ·	STATE		
	Unit Letter J : 1	650 Feet From The South Li	ine and 1980 Feet From	The East		
				102		
	Line of Section 36 To	ownship 24S Range	36E , NMPM,	Lea County		
Ш.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	AS Address (Give address to which appr	oved copy of this form is to be sent)		
-	Western Oil Transport Name of Authorized Transporter of Ca	ation Co., Inc.	P.O. Box 1183, Houston			
	El Paso Natural Gas C	AAA	P.O. Box 1492, El Paso			
	If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas actually connected? W	N/A		
137		th that from any other lease or pool,				
17.	Designate Type of Completic	on — (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv		
	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		
Perioruitons			· · · · · · · · · · · · · · · · · · ·	4		
	HOLE SIZE	TUBING, CASING, AND	D CEMENTING RECORD DEPTH SET	SACKS CEMENT		
v.	TEST DATA AND REQUEST FO			and must be equal to or exceed top allow		
	OIL WELL Date First New Oil Run To Tanks	able for this de	pth or be for full 24 hours) Producing Method (Flow, pump, gas li	ft, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	The state of the s	Cil-Bbis.	Water - Bbla.	Gas - MCF		
	Actual Prod. During Test	OII-BEIE.	water - Bols.	Gas-MCF		
	GAS WELL					
	Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate		
}	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
VI.	CERTIFICATE OF COMPLIANC)	OIL CONSERVAT	I		
	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. Allow Market (Signature)		APPROVED			
-						
•			DISTRICT I SUPERVISOR			
			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 deviation tests taken on the well in accordance with RULE 111.			
_	Production Clerk.		All sections of this form mu	at be filled out completely for allow-		

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 C-104 must be filed for each pool in multiply completed wells.