

APR 25 1990

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OPERATOR		✓
PRODUCTION OFFICE		✓

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501A. C. D.  
ARTSIA, OFFICEForm C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator C. W. Trainer ✓

Address c/o Oil Reports & Gas Services, Inc. Box 755, Hobbs, NM 88241

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) <u>Effective 4/1/90</u>
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

☒ Dry Gas  
☐ Condensate

If change of ownership give name and address of previous owner Diasu Oil & Gas Co., Inc. 4422 FM 1960 West, Suite 400, Houston TX 7706

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>White Ranch</u>	Well No. <u>2</u>	Pool Name, including Formation <u>White Ranch - Miss. Gas</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location Unit Letter <u>L</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u>				
Line of Section <u>34</u> Township <u>11S</u> Range <u>29E</u> NMPM, (Chaves County				

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> <u>Permian SCURLOCK PERMIAN CORP EFF 9-1-91</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1183, Houston, TX 77251-1183</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>C. W. Trainer</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 755, Hobbs, NM 88241</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>E</u>	Sec. <u>34</u>
	Twp. <u>11S</u>	Rge. <u>29E</u>
Is gas actually connected?		When
<u>Yes</u>		<u>4/4/79</u>

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

NOTE: Complete Parts IV and V on reverse side if necessary.

## VI. 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.

Mike Williams  
(Signature)

Agent

(Title)

April 23, 1990

(Date)

## OIL CONSERVATION DIVISION

APPROVED MAY 7 1990, 19BY ORIGINAL SIGNED BYMIKE WILLIAMSTITLE SUPERVISOR, DISTRICT II

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.

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