

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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MAY 26 1992

O. C. D.
SPECIAL OFFICE

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Old Loco Oil Co. ✓

Address P.O. Box 113, Loco Hills, N.M. 88255

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain) _____

If change of ownership give name and address of previous owner Siete Oil & Gas, P.O. Box 2523, Roswell, N.M. 88201

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Eagle Federal</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Grayburg Jackson-Seven Rivers</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>NM29267</u>
Location <u>Queen G-SA</u>				
Unit Letter <u>B</u>	<u>660'</u>	Feet From The <u>North</u>	Line and <u>1980'</u>	Feet From The <u>East</u>
Line of Section <u>30</u>	Township <u>17 South</u>	Range <u>29 East</u>	<u>NMPM</u> , <u>Eddy</u> County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Phillips Petroleum Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Pebbrook, Odessa, Texas 79762</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips 66 Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 5400, Bartsville, OK 74005-5400</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>D</u> Sec. <u>30</u> Twp. <u>17</u> Rge. <u>29</u>	<u>NO</u> <u>N/A</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.

(Signature)

(Title)

(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19__

BY _____

TITLE _____

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

If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviate 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 multiple completed wells.