| I NO OF CODIFE DECEMBED ! * | | | |
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| NO. OF COPIES RECEIVED | <u>6</u> | | |
| DISTRIBUTION | NEW MEXICO OL | L CONSERVATION COMMISSION | |
| SANTA FE | | ST FOR ALLOWABLE | Form C-104 |
| FILE / | 7 | | Supersedes Old C-104 and C- Effective 1-1-65 |
| U.S.G.S. | | AND | |
| | AUTHORIZATION TO 1 | TRANSPORT OIL AND NATURAL GAS | \$ |
| LAND OFFICE | | | |
| TRANSPORTER GAS | | | |
| OPERATOR / | | | 13 |
| PRORATION OFFICE | | | . 3 |
| Operator | | | |
| Barber Oil | Inc. | | |
| 901 West Piero | c e C | arlsbad, New Mexico 88220 | |
| Reason(s) for filing (Check prope | | Other (Please explain) | |
| New Well | Change in Transporter of: | | |
| Recompletion | Oil Dry | Gas Gas | |
| Change in Ownership | | ndensate | |
| Change in Ownership | Custinghedu Gus Con | idensate | · |
| If change of ownership give na | ime | 511 midland Jowe | |
| and address of previous owner | G. W. Strake | 3/1 Tridland Jowe | r, midland, |
| DESCRIPTION OF WELL | AND FEACE | na rought set | JU, 79 |
| DESCRIPTION OF WELL A | Well No. Fool Name, Includin | 4/2002 | |
| Le dex-Federal | 1 TUNTEN | • | Lease No. |
| | 8 Hackberry | - Yates 5 State, Federal or | Fee Federal NM-06767 |
| Location | | | |
| Unit Letter J ; | 2090 Feet From The South | Line and 1650 Feet From The | - |
| ,, | | 1 00.110.110 | |
| Line of Section つば | Township 105 Range | 30E , NMPM, E.d. | County |
| | | | County |
| DESIGNATION OF TRANS | PORTER OF OIL AND NATURAL | CAS | |
| Name of Authorized Transporter | | Address (Give address to which approved | conv of this form is to be sent |
| reality of reality of the second | 5. 55. 55. 55. 55. 55. 55. 55. 55. 55. | Tradicise (Othe dadress to which approved | copy of this form is to be sent/ |
| Texas - New Mexico | Pine Line Company | Roy 1510 Malland Ja | vae 70701 |
| Name of Authorized Transporter | of Casinghead Gas 🗍 💮 or Dry Gas 🧮 | Box 1510 Adland e | copy of this form is to be sent) |
| | | | |
| | | | |
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| If well produces oil or liquids, | Unit Sec. Twp. Rge. | Is gas actually connected? When | |
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| give location of tanks. If this production is commingle | | No | |
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TITLE .

President

4-25-68

(Title)

(Date)

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.