RECEIVED BY	
STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT O. C. D.	
ARTESIA, OFFICE	Form C-104 Revised 10-01-78
OIL CONSERV	ATION DIVISION Format 06-01-83 Page 1
	10 X 2088 EW MEXICO 87501
LAND OFFICE	W MEXICO 87501
TRANSPORTER OIL REDUEST F	OR ALLOWABLE
PROBATION OFFICE	AND
	SPORT OIL AND NATURAL GAS
Hondo Oil & Gas Company 🗸	
P. O. Box 2208: Roswell, New Mexico 88201	
Rooson(s) for filing (Check proper box)	Other (Please explain)
	Change in Operator name
Change in Ownership Casinghead Gas	Condensate Effective March 1, 1987
If change of ownership give name ARCO Oil and Gas Compared	ny - Division of Atlantic Richfield Company
P. O. Box 1610, Midland	
II. DESCRIPTION OF WELL AND LEASE	* Unitization Number: 14-08-001-11572
Lease Name Well No. Pool Name, Including F East Shugart Unit 30 Shugart Yates	s, 7R, Q, GB. Siste, Federal *
Location	
Unit Letter C : 330 Feet From The North Li	ne and Feet From The West
Line of Section 3 Township 185 Range	31E , NMPM, Eddy County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	LGAS Addess (Give address to which approved copy of this form is to be sent;
Shut In 5-6-86	inter form is to be sent
Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Unit Sec. 'Twp. Rge.	le gas ectually connected? When
If well produces oil or liquids, que location of tanks.	5-8-87 The DO
If this production is commingled with thet from any other lesse or pool,	give commingling order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED MAY 7 1987
been complied with and that the information given is true and complete to the best of my knowledge and belief.	
	BY Original Signed By Les A. Clements
	TITLE Supervisor District
- Rojan domber	This form is to be filed in compliance with RULE 1104.
/Bignature)	If this is a request for slowable for a newly drilled or deepene well, this form must be accompanied by a tabulation of the deviation between the second state of the deviation
	tests taken on the well in accordance with RUL g 111. All sections of this form must be filled out completely for allow
022787	shie on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner
(Date)	well name or number, or transporten or other such change of condition
	Separate Forms C-104 must be filed for each pool in multiply completed wells.

Separate	Forms	C-104	must	be	filed	for	each	pool	in	multion
completed we	116.							•		