REGEIVED BY	
STATE OF NEW MEXICO FEB 14 1985	Form C-104 Revised 10-01-78
DISTRIBUTION ARTESIA, OFICENSERV, BANTA PE P. O. BC P. O. BC	ATION DIVISION Format 06-01-83 Page 1 DX 2088 W MEXICO 87501
LAND OFFICE	RALLOWABLE
AND AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
Point Petroleum Corporation	
P.O. Box 3805; Midland, TX 79702 Resson(s) for filing (Check proper box) New Well Change in Transporter of:	Other (Please explain)
	אץ Gas ondensate
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE         Lease Name       Well No. Pool Name, Including F         Nickson A       1         Shugart (Y.	
Location Unit Letter Feet From The North Line and Feet From The West	
Line of Section 4 Township 19 South Range 3	31 East , NMPM, Eddy County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Nome of Authorized Transporter of OIL Or Condensate         Address (Give address to which approved copy of this form is to be sent)	
Texas New Mexico Pipeline Name of Authorized Transporter of Casinghead Gas ar Dry Gas	P. O. Box 1510: Midland TX 79702 Address (Give address to which approved sopy of this form is to be sent) 4001 Address [Address for which approved sopy of this form is to be sent]
If well produces oil or liquids, Unit Sec. Twp. Rge. give location of tanks. D 4 195 31e	is gas actually connected? When Yuls. Z-J-6/ Part ID-3
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	OIL CONSERVATION DIVISION
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	APPROVED FEB 19 1985
my knowledge and belief.	Lestie A. Clements
	TITLESupervisor District II
(Signative)	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
<u>Steve Sell - Vice President</u> Febuary 13, 1985	All soctions of this form must be filled out completely for silor.~ able on new and recompleted wells.
(Date)	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 Forma C-104 must be filed for each pool in multiply completed wells.

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