DISTRICT I
P.O.Box 1980, Hobbs, NM 88241-1980
DISTRICT II

P.O. Drawer DD, Artesia, NM 88211-0719

1000 Rio Brazos Rd, Aztec, NM 87410

DISTRICT III

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088



Form C-126 Revised 4-1-91

Submit 4 copies to appropriate district office

PERMIT TO TRANSPORT RECOVERED LOAD OIL

(NOTE: Required only when load oil was obtained from source other than lease on which used.)
(See Rule 508, 1104, and 1126)

	(See Rule 508,	1104, and 1126)		
RECOVERED LOAD OIL		ADDRESS		-
OPERATOR A DOCUMENT OF THE PROPERTY OF THE PRO				
ARCO Oil and Gas Company		P.O. Box 1710, Hobbs, NM 88240		
LEASE NAME	WELL NO.	POOL		COUNTY
Baish Federal	2	N. Shugart	Bone Springs	Eddy
Unit Ltr B, Section 9, T18S, R31E		TRANSPORTER		
		Pride Pipeline Company		
	DDIS IOAD OI	I PECOVEDED		
BBLS. LOAD OIL RECOVERED				
119.54				
SOURCE OF LOAD OIL				
	PURCHA	SED OIL		
BARRELS PURCHASED		DATE PURCHASE	D	
PURCHASED FROM		ADDRESS		
BARRELS PURCHASED		DATE PURCHASED		
PURCHASED FROM		ADDRESS		
OIL T	TRANSFERRED FROM A POOL FROM WHICH TRANS		E OR POOL LEASE FROM WHICH TR	ANCITABLE
119.54	N. Shugart Morroy	Shugart Morrow Paton B Federal Paton B Fed		
05/22/91 Form C-1			.1 Lease #NMNM726	10
03, 22, 31		Terai (redera	T Lease #Whiti720	+2
BARRELS TRANSFERRED POOL FROM WHICH TRANS		FERRED LEASE FROM WHICH TRANSFERRED		ANSFERRED
DATE OF LETTER OF NOTIFICATION OF	F TRANSFER IN COMPLIANC	E WITH RULE 1104 (F)	
			V	
BARRELS TRANSFERRED	POOL FROM WHICH TRANSFE		ERRED LEASE FROM WHICH TRANSFERRED	
	CONTRACTOR DI COLORI I LA CO	T MITTI DITT 1104	<u> </u>	
DATE OF LETTER OF NOTIFICATION OF	F IKANSPEK IN COMPLIANC	E WITH KULE 1104 (r)	
				`
DDCD A TOD.		OII CONSE	RVATION DIVISIO	N .
<u>DPERATOR:</u> I hereby certify the information a best of my knowledge and belief		OID CONSE		<u>*</u>
ocest of HIA-strommerike was certer	į	Approved by	ORIGINAL SIGNE	7 18 1

OPERATOR: I hereby certify the information above is true and complete to	OIL CONSERVATION DIVISION		
best of my knowledge and belief Signature	Approved by:	ORIGINAL SIGNED BY	
Printed Name James D. Cogburn, Administrative	Title:	MIKE WILLIAMS SUPERVISOR, DISTRICT IT	
& Title Supervisor Date 05/28/91 Telephone No. 505-392-1621	Date:	MAY 3 0 1991	