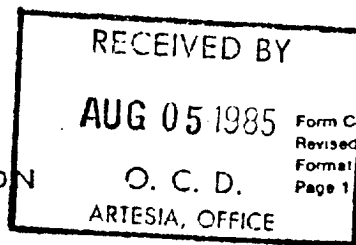


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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



REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Person(s) for filing (Check proper box)
J.C. Williamson ✓
Address
P.O. Box 16 Midland, Texas 79702
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas
Change in Ownership ☐ Casinghead Gas ☒ Condensate
Other (Please explain)

Change of ownership give name
address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name Canter Federal	Well No. 1	Pool Name, including Formation East Burton Flats Morrow	Kind of Lease State, Federal or Fee Federal	Lease No. NM0556290
Unit Letter 0 : 660' Feet From The S Line and 1980' Feet From The E				
Line of Section 10 Township 20 Range 29 , NMPM, Eddy County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas	P.O. Box 1492 El Paso, TX 79978
Well produces oil or liquids, location of tanks.	Is gas actually connected? When
	NO yes Unknown 2-6-86

If 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.

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)
Agent
8/1/85
(Date)

OIL CONSERVATION DIVISION
APPROVED FEB 20 1986
BY *(Signature)*
TITLE SUPERVISOR, DISTRICT 4

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