STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

or corice bec	41460		
DISTRIBUTION			
SANTA PE			
FILE			
V.8.0.8.			
LAND OFFICE			
TRANSPORTER	OIL		
	BAD	Ι	
OPERATOR			
PROPATION OFFICE			

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

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Address Reason(s) for filing (Check proper box) New Well Change in Transporter of: Dry Gas Oil Recompletion Casinghead Gas Condensate Change in Ownership If change of ownership give name and address of previous owner_ II. DESCRIPTION OF WELL AND LEASE Lease No. Pool Name, Including Formation Well No. Lease Name State, Federal or Fee 1 ch عد -MONLocation NMPM Range Township Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate 🔀 Name of Authorized Transporter of Oil N Nera Address (Give address to which approved copy of this form is to be sent) or Dry Gas 🔀 Name of Authorized Transporter of Casinghead Gas ~C9. When is gas actually connected? Roe. If well produces oil or liquids, give location of tanks. 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. OIL CONSERVATION DIVISION

VI. 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.

Geny L. Thames	_
OWNER (Signature)	
June 6, 1988	
(Date)	

SUPERVISOR DISTORT

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 filled for each pool in multiply completed wells.