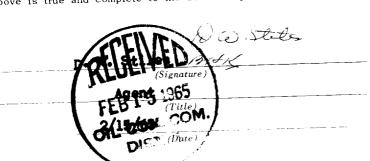
NO. OF COPIES RECEIVED 5			,
DISTRIBUTION ANTA FE /	NEW MEXICO OIL CO REQUEST F	NSERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C- Effective 1-1-65
		AND	Effective 1-1-63
ILE	AUTHODIZATION TO TRAN	SPORT OIL AND NATURAL (GAS
,s.G.s.	AUTHORIZATION TO TRAI	(O) O(C) O(E) / ((O) O(E)	
AND OFFICE			
RANSPORTER OIL /			
G AS /			
PERATOR /			
PROPATION OFFICE			
perator	0		
W. P.	Carr		
ddresis	A C Delles Towns		
6700 Fore	st Lane, Dallas, Texas	Other (Please explain)	
eason(s) for filing (Check proper box)		Office (1 tease on promise)	
ew Wel!	Change in Transporter of:		
ecompletion	Oil X Dry Gas		
hange in Ownership	Casinghead Gas Conden	sate	
change of ownership give name			
d address of previous owner			
THE PROPERTY OF THE LAND	I FACE		
ESCRIPTION OF WELL AND	Well No. Pool Nar	ne, Including Formation	Kind of Lease
ease Name	1 Mags	Verde	State, Federal or Fee Fee
Larcher	1 8690		
Location		e and 1350 Feet From	The West
Unit Letter <u>K</u> ; 17	50 Feet From The South Lin	e and Feet from	111.0
ESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S Address (Give address to which appr	roved copy of this form is to be sent)
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi	TER OF OIL AND NATURAL GA	Address (Give address to which appropriate Box 108, Farmington, Address (Give address to which appropriate appropriate address to which ad	roved copy of this form is to be sent) New Mexico roved copy of this form is to be sent)
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA TER OIL AND NATURAL GA TER OF OIL AND NATURAL G	Address (Give address to which appropriate Address (Give address (Give address to which appropriate Address (Give address (Give address to which appropriate Address (Give addr	roved copy of this form is to be sent) New Mexico roved copy of this form is to be sent)
ESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids,	TER OF OIL AND NATURAL GA or Condensate X stringhead Gas or Dry Gas X Company Unit Sec. Twp. Rge.	Address (Give address to which appropriate Box 108, Farmington, Address (Give address to which appropriate farmington, New Mexits gas actually connected?	roved copy of this form is to be sent) New Mexico roved copy of this form is to be sent) CO
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks.	TER OF OIL AND NATURAL GA TER OIL AND NATURAL GA TER OF OIL AND NATURAL G	Address (Give address to which appropriate Box 108, Farmington, Address (Give address to which appropriate Farmington, New Mexits 18 gas actually connected?	roved copy of this form is to be sent) New Mexico roved copy of this form is to be sent) CO
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks.	TER OF OIL AND NATURAL GA TER OIL AND NATURAL GA TER OF OIL AND NATURAL G	Address (Give address to which appropriate Box 108, Farmington, Address (Give address to which appropriate Farmington, New Mexits 18 gas actually connected?	roved copy of this form is to be sent) New Mexico roved copy of this form is to be sent) CO
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled well are the second or the second or the second of the second of tanks.	TER OF OIL AND NATURAL GA I or Condensate Issinghead Gas or Dry Gas S Company Unit Sec. Twp. Rge. K 7 31 10 ith that from any other lease or pool,	Address (Give address to which appropriate Address (Give address (Give address to which appropriate Address (Give address (Give address to which appropriate Address (Give address (Give address (Give address (Give address to which appropriate Address (Give addre	New Mexico roved copy of this form is to be sent) New Mexico roved copy of this form is to be sent) CO When
Plateau, Inc. Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA	TER OF OIL AND NATURAL GA Terror or Dry Gas X S Company Unit Sec. Twp. Rge. K 7 31 10 The ith that from any other lease or pool, Oil Well Gas Well	Address (Give address to which appropriate Address (Give address (Give address to which appropriate Address (Give a	New Mexico roved copy of this form is to be sent) roved copy of this form is to be sent) CO When
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled well are the second or the second or the second of the second of tanks.	TER OF OIL AND NATURAL GA TER OF OIL AND NATURA	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Re
Plateau, Inc. Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completic	TER OF OIL AND NATURAL GA Terror or Dry Gas X S Company Unit Sec. Twp. Rge. K 7 31 10 The ith that from any other lease or pool, Oil Well Gas Well	Address (Give address to which appropriate Address (Give address (Give address to which appropriate Address (Give address (Give address to which appropriate Address (Give address (Give address (Give address (Give address to which appropriate Address (Give addre	New Mexico roved copy of this form is to be sent) roved copy of this form is to be sent) CO When
ESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completic	TER OF OIL AND NATURAL GA or Condensate X ssinghead Gas or Dry Gas X S Company Unit Sec. Twp. Rge. X 7 31 10 ith that from any other lease or pool, ion — (X) Date Compl. Ready to Prod.	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Reserved Diff. Rese
ESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. I this production is commingled w COMPLETION DATA Designate Type of Completi	TER OF OIL AND NATURAL GA TER OF OIL AND NATURA	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Restv. Diff, Re
ESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi	TER OF OIL AND NATURAL GA or Condensate X ssinghead Gas or Dry Gas X S Company Unit Sec. Twp. Rge. X 7 31 10 ith that from any other lease or pool, ion — (X) Date Compl. Ready to Prod.	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Reserved Diff. Reserv
ESIGNATION OF TRANSPOR Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded	TER OF OIL AND NATURAL GA or Condensate X ssinghead Gas or Dry Gas X S Company Unit Sec. Twp. Rge. X 7 31 10 ith that from any other lease or pool, ion — (X) Date Compl. Ready to Prod.	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Reserved Diff. Rese
Plateau, Inc. Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completic	TER OF OIL AND NATURAL GA TER OF OIL AND NATURA	Address (Give address to which appress to the second of th	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Re
Plateau, Inc. Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded	TER OF OIL AND NATURAL GA TER OF OIL AND NATURA	Address (Give address to which appress to the second of th	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Reserved Diff. Reserved Depth Depth Casing Shoe
Plateau, Inc. Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded Pool Perforations	TER OF OIL AND NATURAL GAR TER OF OIL AND NATURAL GAR TER OF OIL AND NATURAL GAR TO Condensate X To Condensate X To Date Company Oil Well Gas Well Oil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Reserved Diff. Reserv
Plateau, Inc. Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded	TER OF OIL AND NATURAL GA TER OF OIL AND NATURA	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Re P.B.T.D. Tubing Depth Depth Casing Shoe
Plateau, Inc. Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded Pool Perforations	TER OF OIL AND NATURAL GAR TER OF OIL AND NATURAL GAR TER OF OIL AND NATURAL GAR TO Condensate X To Condensate X To Date Company Oil Well Gas Well Oil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Re P.B.T.D. Tubing Depth Depth Casing Shoe
Plateau, Inc. Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded Pool	TER OF OIL AND NATURAL GAR TER OF OIL AND NATURAL GAR TER OF OIL AND NATURAL GAR TO Condensate X To Condensate X To Date Company Oil Well Gas Well Oil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Re P.B.T.D. Tubing Depth Depth Casing Shoe
Plateau, Inc. Name of Authorized Transporter of Oi Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded Pool Perforations	TER OF OIL AND NATURAL GAR TER OF OIL AND NATURAL GAR TER OF OIL AND NATURAL GAR TO Condensate X To Condensate X To Date Company Oil Well Gas Well Oil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation	Address (Give address to which appropriate to the property of	New Mexico roved copy of this form is to be sent) CO When Plug Back Same Res'v. Diff. Reserved Diff. Reserved Depth Depth Casing Shoe
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded Pool HOLE SIZE	TER OF OIL AND NATURAL GA TER OF OIL AND NATURAL GA or Condensate X ssinghead Gas or Dry Gas X S COMPANY Unit Sec. Twp. Rge. K 7 31 10 ith that from any other lease or pool, ion - (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE	Address (Give address to which appress to the second of th	Plug Back Same Res'v. Diff. Research P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded Pool HOLE SIZE	TER OF OIL AND NATURAL GA TOP OIL AND NAT	Address (Give address to which appresent to the property of total volume of load	Plug Back Same Res'v. Diff. Research P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, quive location of tanks. If this production is commingled we COMPLETION DATA Designate Type of Completi Date Spudded Porforations HOLE SIZE TEST DATA AND REQUEST OIL WELL	TER OF OIL AND NATURAL GA TER OF OIL AND NATURAL GA or Condensate X stringhead Gas or Dry Gas X S COMPANY Unit Sec. Twp. Rge. K 7 31 10 ith that from any other lease or pool, ion — (X) Oil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this	Address (Give address to which appresent to the property of total volume of load denth or be for full 24 hours) Address (Give address to which appresent to the property of total volume of load denth or be for full 24 hours)	Plug Back Same Res'v. Diff. Research P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded Pool Hole Size	TER OF OIL AND NATURAL GA TOP OIL AND NAT	Address (Give address to which appresent to the property of total volume of load	Plug Back Same Res'v. Diff. Research P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled we COMPLETION DATA Designate Type of Completi Date Spudded Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL	TER OF OIL AND NATURAL GA TER OF OIL AND NATURAL GA or Condensate X stringhead Gas or Dry Gas X S COMPANY Unit Sec. Twp. Rge. K 7 31 10 ith that from any other lease or pool, ion — (X) Oil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this	Address (Give address to which appropriate Box 108, Farmington, Address (Give address to which appropriate Farmington, New Mexits gas actually connected? Yes give comming ing order number: New Well Workover Deepen Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) Producing Method (Flow, pump, ga	New Mexico roved copy of this form is to be sent) CO The Plug Back Same Res'v. Diff. Re P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top as lift, etc.)
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded Pool Hole Size TEST DATA AND REQUEST OIL WELL Date First New Oil Hun To Tanks	TER OF OIL AND NATURAL GA TER OF OIL AND NATURAL GA or Condensate X stringhead Gas or Dry Gas X S COMPANY Unit Sec. Twp. Rge. K 7 31 10 ith that from any other lease or pool, ion — (X) Oil Well Gas Well Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AN CASING & TUBING SIZE FOR ALLOWABLE (Test must be able for this	Address (Give address to which appresent to the property of total volume of load denth or be for full 24 hours) Address (Give address to which appresent to the property of total volume of load denth or be for full 24 hours)	Plug Back Same Res'v. Diff. Research P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled we COMPLETION DATA Designate Type of Completi Date Spudded Perforations HOLE SIZE TEST DATA AND REQUEST OIL WELL	TER OF OIL AND NATURAL GA TO Condensate A Stringhead Gas or Dry Gas X SCORPANY Unit Sec. Twp. Rge. K 7 31 10 The Complete of Test must be able for this Date of Test Test must be able for this	Address (Give address to which appropriate Box 108, Farmington, Address (Give address to which appropriate Farmington, New Mexits gas actually connected? Yes give comming ing order number: New Well Workover Deepen Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) Producing Method (Flow, pump, ga	Plug Back Same Res'v. Diff. Reserved copy of this form is to be sent) Plug Back Same Res'v. Diff. Reserved Copy P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top s lift, etc.) Choke Size
DESIGNATION OF TRANSPOR Name of Authorized Transporter of Or Plateau, Inc. Name of Authorized Transporter of Co El Paso Natural Ga If well produces oil or liquids, give location of tanks. If this production is commingled w COMPLETION DATA Designate Type of Completi Date Spudded Pool Hole Size TEST DATA AND REQUEST OIL WELL Date First New Oil Hun To Tanks	TER OF OIL AND NATURAL GA TO Condensate A Stringhead Gas or Dry Gas X SCORPANY Unit Sec. Twp. Rge. K 7 31 10 The Complete of Test must be able for this Date of Test Test must be able for this	Address (Give address to which appropriate Box 108, Farmington, Address (Give address to which appropriate Farmington, New Mexits gas actually connected? Yes give comming ing order number: New Well Workover Deepen Total Depth Top Oil/Gas Pay AD CEMENTING RECORD DEPTH SET after recovery of total volume of load depth or be for full 24 hours) Producing Method (Flow, pump, ga	New Mexico roved copy of this form is to be sent) CO The Plug Back Same Res'v. Diff. Re P.B.T.D. Tubing Depth Depth Casing Shoe SACKS CEMENT oil and must be equal to or exceed top as lift, etc.)

GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Choke Size Casing Pressure Tubing Pressure Testing Method (pitot, back pr.)

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.



OIL CONSERVATION COMMISSION

APPROVED TITLE .

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 Sections I, II, III, and VI only 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.