## 

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

Form Cit04 Pevised 10:01:78 Formal 06-01-83 Page 1

Securate Forms 1-124 must be filed for each pool in multiple

O CFFICE		
MIPORTER OIL I	TOD ALLOWARIE	
REQUEST	FOR ALLOWABLE AND	
AUTHORIZATION TO TRA	ANSPORT OIL AND NATURAL GAS	
		_
teret	•	
FEXACO Inc.		
O. Box 728, Hobbs, New Mexico 88240		
son(s) for filing (Check proper box)	Other (Please explain) Change of Transporter from Getty Oil Co.	
New Well Change in Transporter of:	to mevaco modification officiation 6/1/05	
Recompletion		•
Change in Ownership ACasinghead Gas	Condensate	
ange of ownership give name address of previous owner		_
DESCRIPTION OF WELL AND LEASE		
ne Name Well No. Pool Name, Includi		
Skelly F State 2 Fumont Yate	es 7-Rivers Oueen State, Foderal or Foo State B-1336	
Gilon		
Unit Cetter 0; 660 Feet From The South	Line and 1980 Feet From The East	-
Line of Section 17 Township 20S Range	37E , NMPM, Lea County	
DESIGNATION OF TRANSPORTER OF OIL AND NATU  The oil Authorized Transporter of Oil  or Condensate   Shell Pipeline Co.	P.O. Box 1910, Midland, TX 79702	
ne of Authorized Transporter of Casinghead Gas 💢 or Dry Gas 🗔	P.O. Box 1589, Tulsa, OK 74102	
Warren Petroleum Corp.		_
vell produces oil or liquids, e location of tanks.	1	_
his production is commingled with that from any other lease or p	pool, give commingling order number:	-
TE: Complete Parts IV and V on reverse side if necessary.		
	OIL CONSERVATION DIVISION	
CERTIFICATE OF COMPLIANCE	. 0 2 6/1 . 85	
reby certify that the rules and regulations of the Oil Conservation Division	have APPROVED, 19	_
s complied with and that the information given is true and complete to the be	BY Livingin	
knowledge and belief.	DISTRICT I SUFERVISOR	
, .	TITLE	_
w.B. hh.	This form is to be filed in compliance with MULE 1104.	
	If this is a request for alloweble for a newly drilled or descen well, this form must be accompanied by a tabulation of the deviati	: ت نت .
(Signature)	teets taken on the well in accordance with RULI !!!.	
Estrict Operations Manager	All sections of this form must be filled out completely for allo	<b>9</b>
— <i>← tule)</i> 	FILL our char regions I. II. and VI for charges of owns	= <i>:</i>
(Date)	Fill out onthe serious t, il. im, and it of charge of conditions name or number, or manaporter, or other such change of conditions	
10-11/		

il -rmojetes weils.