

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	OXY USA Inc.		
Address	P. O. Box 50250, Midland, TX 79710		
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)	
<input type="checkbox"/> New Well	<input type="checkbox"/> Oil	Change of operator's name	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Dry Gas	effective April 1, 1988	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner Cities Service Oil & Gas Corp., P. O. Box 50250, Midland, TX 79710

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
State CB	1	Maljamar (G-SA)	State, Federal or Fee State	B-5310
Location				
Unit Letter	G	2310 Feet From The	North Line and	2310 Feet From The
Line of Section	32	Township	17S	Range
			33E	NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Texas-New Mexico Pipeline Company	P. O. Box 2528 - Hobbs, New Mexico 88240	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Phillips Petroleum Company	P. O. Box 2130 - Hobbs, New Mexico 88240	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
G	32	17S
		33E
Is gas actually connected?	When	
Yes		

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.

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.

F. A. Vitrano
(Signature) F. A. Vitrano
District Operations Manager - Production
(Title)
March 15, 1988
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 25 1988, 19____
BY Paul Kautz
TITLE Geologist

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 deviated 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.