

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

I. Operator
Hillin-Simon Oil Company
Address
P. O. Box 1552, Midland, Texas 79702
Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in Ownership
Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate
Other (Please explain)

If change of ownership give name and address of previous owner Martindale Petroleum Corp., Box 2403, Hobbs, NM 88240

II. DESCRIPTION OF WELL AND LEASE
Lease Name CARTER Well No. 1 Pool Name, including Formation CARTER SAN ANDRES - SOUTH Kind of Lease State, Federal or Fee FEE Lease No.
Location
Unit Letter A : 330 Feet From The NORTH Line and 330 Feet From The EAST
Line of Section 7 Township 18 S Range 39 E , NMPM, LEA County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Permian Corp. SCURLOCK PERMIAN CORP EFF 9-1-91 Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1183, Houston, TX 77251
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. Is gas actually connected? When

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.

W. K. Finkbeiner
(Signature)
Operations Manager
(Title)
12-1-88
(Date)

OIL CONSERVATION DIVISION
DEC 19 1988
APPROVED
ORIGINAL SIGNED BY JERRY SEXTON
BY
DISTRICT I SUPERVISOR
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 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.

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DEC 9 1988

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