

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

| | | |
|-----------------------|-----|--|
| NO. OF COPIES DESIRED | | |
| DISTRIBUTION | | |
| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRODUCTION OFFICE | | |

I.

Operator
Exxon Corporation Attn: Permits Supervisor

Address
P.O. Box 1600, Midland, TX 79702

Reason(s) for filing (Check proper box)

| | | |
|--|--|--|
| <input type="checkbox"/> New Well | Change in Transporter of: | Other (Please explain) Effective 1-1-89 |
| <input type="checkbox"/> Recompletion | <input checked="" type="checkbox"/> Oil | |
| <input type="checkbox"/> Change in Ownership | <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate | |

If change of ownership give name and address of previous owner N/A

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|----------------------------------|-----------------|--|--|-----------------------|
| Lease Name New Mexico V State | Well No. 9 | Pool Name, including Formation Hare-Simpson | Kind of Lease State, Federal or Fee State | Lease No. Unavaila |
| Location | | | | |
| Unit Letter K | 1980 | Feet From The South | Line and 1980 | Feet From The West |
| Line of Section 10 | Township 21S | Range 37E | , NMPM, Lea County | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

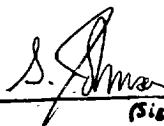
| | |
|--|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Shell Pipeline Corporation | 1609 Main, Eunice, NM, 88231 |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| None | |
| If well produces oil or liquids, give location of tanks. | Is gas actually connected? When |
| Unit: K Sec.: 10 Twp.: 21S Rge.: 37E | No To be determined |

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.



Administrative Specialist

(Title)

12-28-88

(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 04 1989, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
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 multiple completed wells.

CONFIDENTIAL
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED
DATE 10/17/00 BY 1043/SP/STP

RECEIVED

JAN 3 1989

OCD
HOBBS OFFICE