STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		1	
SAHTA FE			_
FILE			_
U.B.G.S.		1	_
LAND OFFICE		1	
TRANSPORTER	DIL		_
	GAS		
OPERATOR		1	
PROHATION OFFICE			

Operator

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

Address Product	tion Company				
P. 0. Box 1861, Midland,	Texas 79702				
Reason(s) for filing (Check proper box)		Other (Please explain)			
New Well Recompletion	Change in Transporter of:	Lease na	Lease name change from Drinkard to		
Change in Ownership		Dry Gom E. E. Drinkard.			
Change in Goneramy	Casinghead Gas	Condensate			
If change of ownership give name and address of previous owner					
II. DESCRIPTION OF WELL AND LI					
Legae Name	Well No. Pool Name, Including	Formation	Kind of Lease	Lease No.	
E. E. Drinkard	l 1 Blinebry	Oil & Gas	State, Foderal or Fee		
Unit Letter C ; 330	_ Feet From The North _ L	-	Feet From The West		
23 Township	P 22-S Range	37-E , NMPM	· Lea	County	
III. DESIGNATION OF TRANSPORT	TER OF OIL AND NATURA	AL GAS			
Name of Authorized Transporter of Oil	or Condensate	Address (Give address	to which approved copy of this form is	to be sent)	
Shell Oil Pipeline Name of Authorized Transporter of Casingha		P. O. Box 1509	, Midland, Texas 79701	· · · · · · · · · · · · · · · · · · ·	
[ead Gas 📉 of Dry Gas 🦳	Address (Give address	to which approved copy of this form is	to be sentj	
El-Paso Natural Gas	Sec. Twp. Rge.	Jal, New Mexic	0 88252		
If well produces oil or liquids, give location of tanks.	25 22 37	Yes	f i	153	
If this production is commingled with that from any other lease or pool, give commingling order number:					
		, give comminging order	number:		
NOTE: Complete Parts IV and V on	reverse side if necessary.				
VI. CERTIFICATE OF COMPLIANCE		[]	DNSERVATION DIVISION		
I hereby certify that the rules and regulations of	the Oil Conservation Division have	APPROVEDA	PR 1.9 1004	19	
been complied with and that the information give my knowledge and belief.	in is true and complete to the best of	Il mu	- ·		
,	•	BY ORIG	INAL SIGNED BY JEARY SEXTOR	V	
\bigcirc \bigcirc \bigcirc \bigcirc		TITLE	TITLE DISTRICT I SUPERVISOR		
() of the took	**	This form is to	be filed in compliance with RULE	1104.	
Senior Accounting Assistar	nt	If this is a roqu well, this form must	est for allowable for a newly drillo be accompanied by a tabulation of sell in accordance with RULE 111	d or deepened	
(Title) April 9, 1984			his form must be filled out comple		
(Date)		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 completed wells.	C-104 must be filed for each po	ol in multiply	

APR 11 1984
MORE OFFICE

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