

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	✓
FILE	✓
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	✓
PROMOTION OFFICE	

RECEIVED BY  
MAR -9 1987  
O. C. D.  
ARTESIA, 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  
Hondo Oil & Gas Company ✓  
Address  
P. O. Box 2208; Roswell, New Mexico 88201  
Reason(s) for filing (Check proper box)  
 New Well  
 Recompletion  
 Change in Ownership  
Change in Transporter of:  
 Oil  
 Casinthead Gas  
 Dry Gas  
 Condensate  
Other (Please explain)  
Change in Operator name  
Effective March 1, 1987

If change of ownership give name and address of previous owner  
ARCO Oil and Gas Company - Division of Atlantic Richfield Company  
P.O. Box 1610, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Turner "B"	31	Fren Seven Rivers	State, Federal or Fee Federal	IC 029395B
Location	Unit Letter	Feet From The	Line and	Feet From The
	P	330	South	330
			Line and	East
Line of Section	Township	Range	NMPM	County
17	17S	31E		Eddy

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
NONE-SI						
Name of Authorized Transporter of Casinthead 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.	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.

*[Signature]*  
PROD SEC  
(Title)  
2/27/87  
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 16 1987, 19 \_\_\_\_\_  
BY \_\_\_\_\_ Original Signed By  
Les A. Clements  
TITLE \_\_\_\_\_ Supervisor District II

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.