PECENED BY

MAR -9 1987

O. C. D. ARTESIA, OFFICE

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTE			1	
BANTA FE		,	l	
FILE				1
V.8,0.8.			1	
LAND OFFICE	1		١	
TRANSPORTER	OIL			
	GAS			Ì
OPERATOR	1			
-				

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-63 Page 1

REQUEST FOR ALLOWABLE

PROBATION OFFICE	ALITHODIZATION		AND	410					
1.	AUTHORIZATION	TO TRAN	SPUR I UIL	. AND NAT	JRAL GAS				
Operator					- 				
Hondo Oil & Gas Company	<u>y</u>								
	• • • • • • • • • • • • • • • • • • • •						· · · · · · · · · · · · · · · · · · ·		
P. O. Box 2208; Roswell Resson(s) for filing (Check proper hoz)	II. New Mexico	o 88201		0.1					
New Well	Change in Transporter of:				Other (Please explain)				
Recompletion	OIL		Change in Operator						
X Change in Ownership	Casinghead Gas		Condensure Effective March 1, 1987						
If change of ownership give name A	RCO Oil and G	as Comp	any - D	ivision	of Atlantic Ric	hfield Co	mnanv		
	.O. Box 1610,						iipatty		
II. DESCRIPTION OF WELL AND LE.	ASE		- ICAG	3 / / / UZ.		•			
Turner "B"	Well No. Pool Name,		ng Formation Kind of Lease en Rivers		Kind of Legae		LC No.		
	32 Frei	1 Seven	Kivers		Siete, Federal or Fee	Federal	0293953		
Location							•		
Unit Letter 0 : 330	Feet From TheSc	outhL	ne and1	650	Feet From The	East			
Line of Section 17 Township	170		215						
Line of Section 1/ Township	17S	Range	31E	, NMPN	! <u>. </u>	<u>Eddy</u>	County		
III. DESIGNATION OF TRANSPORT	FR OF OIL AND	NATTIRA	I GAS				•		
Name of Authorized Transporter of Off	or Condensate			Give address	ta which approved copy o	f this form is to	be sent/		
SI-NONE									
Name of Authorized Transporter of Casinghed	of Dry C	Ges 🗀	Address (Give address	to which approved copy o	f this form is to	be sent;		
NONE									
If well produces oil or liquids, que location of tents.	, Sec. Twp.	Rge.	is gas oct	uelly connect	ma? , when				
If this production is compared with the									
If this production is commingled with that		•	Eras comm	ruetruk olasi	numberi				
NOTE: Complete Parts IV and V on r	eversa sida if neces	ssary.				1) } + (D) € •		
VI. CERTIFICATE OF COMPLIANCE				טוו כ	ONSERVATION DI	VICION	3 30 81		
				0.0			Cha mas		
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.		APPRO	VED	MAR 1 6 19	387	19			
		the best of	Original Signed By						
			"		tes A. Clemenis	-			
		TITLE		Supervisor District	Ш				
) Ann Door	1/2		ועב	s form is to	be filed in complianc	s with nul E	1104		
Commission Commission	Chillan -		n a	tie is a requ	set for silowable for s	newiv drilled	4 00 daanaaa		
PRÖD SE	PROD SEC well, this form must be accompanied by a tabulation of the de-						the deviation		
7/32 (¥ ?			IIA	sections of new and rec	this form must be fille completed wells.	d sut complete	ely for allow-		
(Date) Fill out only Sections I. II. III. and VI for the well name or number, or transporten or other such than			VI for chang	Ps of owner.					
		Ì	Separate Forms C-104 must be filed for each pool in multiply						
		3	complete	d wells.			- m mustiply		