

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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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

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DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
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TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

SI

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
☐ Crudehead 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 Turner A	Well No. 29	Pool Name, including Formation Eren Seven Rivers	Kind of Lease State, Federal or Foreign Federal	Lease No. LC 029395A
Location Unit Letter <u>P</u> : <u>705</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>18</u> Township <u>17S</u> Range <u>31E</u> NMPN, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> NONE	Address (Give address in which approved copy of this form is to be sent) Part ID-3
Name of Authorized Transporter of Crudehead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> NONE	Address (Give address to which approved copy of this form is to be sent) 3-10-87 chy ap
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)
2/22/87
(Date)

OIL CONSERVATION DIVISION

MAR 16 1987

APPROVED _____, 19____
BY _____ Original Signed By
Les A. Clements
TITLE _____ Supervisor District 10

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 Form C-104 must be filed for each pool in multiply completed wells.