STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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DISTRIBUTI			
SAMTA PE			
FILE	7		
V.8.0.6,			
LANG OFFICE		7	
TRANSPORTER	016		
	GAB		
OPERATOR .		7	
PROBATION OFFICE			

MAR -9 1987

RECEIVED BY

O. C. D. ARTESIA, OFFICE

Form C-104 Revised 10-01-78 Format 05-01-83 Page 11

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

PROBATION OFFICE	AUTHORIZ	ATION TO	DAN Daskagi		AND NATI	IDAL CAS			
I.			11310	×1 010	AND NATO				
Hondo Oil & Gas Compa	iny o		· · · · · · · · · · · · · · · · · · ·		·				
P. O. Box 2208. Rose	ve 11 Nove	Marias 8	8201					-	
P. O. Box 2208; Roswell, New Mexico 88201 Reston(s) for filing (Check proper box)					Other (Please explain)				
New Well	Change in Transporter of:								
Recompletion	ou		Dry G	Change in Operator name					
Change in Ownership	Cestnah	ead Gas	Conde	Condensate Effective March 1, 1987					
If change of ownership give name	ARCO 011		_						
and address of previous owner	ARCO OII	and Gas	Company	y - Di	vision	of Atlantic Ric	hfield (Company	
II. DESCRIPTION OF WELL AND	P.O. Box	1610, Mi	dland,	Texas	79702				
Lease Name		pai Name, Incl	waine Form	na Formation		Kind of Lease			
Turner "B"	38	Fren Se			_	State, Federal or Fee		Legae No.	
Location		11011 00	ven kr	vers	· ·	State, Federal Br / 66	Federal	-1-0293953	
Unit Letter <u>C</u> ; 990	Feet From 1	De North	l too o	. 23	10		••	•	
		· ··		<u> </u>		Feet From The	West		
Line of Section 20 Towns	hip 17S	Ran	•• 31F	2	, NMPN	١,	Eddy	County	
TT DESCRIPTION	•						THUM Y		
M. DESIGNATION OF TRANSPOR									
	j of Condi	ensate 🗀	٨٥	idress (G	ive address	to which approved copy (of this form is	to be sent;	
SI-NONE Name of Authorized Transporter of Casing	need Can (or Dry Gas (7			. <u>. </u>			
NONE		o. 5., 34.	~ ا ر	IGITARE (C	.A. BESTAIL	to which approved copy o	of this form is	to be sens;	
	nil Sec.	Twp. 'R	ee. [s	748 ectu	ally connects	ed? , When			
give location of tanks.	•			•		1		•	
If this production is commingled with the	hat from env o	ther lease or	cool size		action and a				
					strut order	- IIIIIIIIIII			
NOTE: Complete Parts IV and V or	n reversa sida	if necessary.	•					Part LDus	
VI. CERTIFICATE OF COMPLIANCE	₽					ONSERVATION O	MEION	3-56-87	
					Chy, Cp-				
hereby certify that the rules and regulations of			11	PPROV	/ED	MAR 1 6 198	37	. 19	
been complied with and that the information gi my knowledge and belief.	ven is true and co	omplete to the t	est of			Original Signed By			
,				Y		Les A. Clements	<u> </u>		
•			⊤	ITLE_					
14				This	form in to	Supervisor District I			
Mary Mest Colle	All tile	poll-				set for allowable for			
Signature	<i>d</i> '			ell, this	i (orm must	be accompanied by a	tabulation	of the deviation	
	FC		∥ "			vell in accordance wi			
Tule)				n se sid	len evq tec	thin form must be fille completed wells.	⊶ ont cowol	etern for affor-	
JJJ7/8/			.	Fill	out only 5	ections I. II. III. and	VI for che	nges of owner,	
, (Date)			"	el] Hewe	or number	, or transporter or other	r such chan	se of condition,	
				sapa: meleted	ratu <i>portas</i> Lwells.	C-104 must be filed	for each p	eei in multiply	