STATE OF NEW MEXICO						
ENERGY AND MINERALS DEPARTMENT					Form C-104	
					Revised 10-01-	· ·
	OIL CONSERVATION DIVISION					÷
SANTA FE	P. O. BOX 2088					
FILE	SANTA FE, NEW MEXICO 87501					
	A PE, NE		-0 8/501			
TRANSPORTER	REQUEST FO	RALLOW				
OPERATOR		ND		•		
PROBATION OFFICE AUTHORIZATIO	N TO TRANS	PORT OIL	AND NATU	RAL GAS		
Ι.						
Operator						
Bliss Energy Corporation						
Address	<u> </u>					
P. O. Box 1817 Hobbs, New Mex	ico 8824	41				
Reason(s) for filing (Check proper box)			Other (Please	e explain)		
New Well Change in Transpo	orter of:	1	Operat	or's Name Chang	0	
Becompletion Oil		ry Gas	operat	or s mane oriang	e	
Change in Ownership Casingheod G		ondensate				
				·····		
If change of ownership give name Bliss Petrole	m, Inc.	<u>P. O.</u>	Box 1817	Hobbs, NM	88240	
II. DESCRIPTION OF WELL AND LEASE	me, including F	ormation		Kind of Lease	1	Leuse No.
	ls Devonia			State, Federal or Fee	State	
Location		<u> </u>				
Unit Letter K : 660 Feet From The	North_Lin	• and _198	80	Feet From TheWe	st	
Line of Section 2 Township 11 S	Range 37	7 E	, NMPM	Lea		County
Line of Section 2 Township II 5			, , , , , , , , , , , , , , , , , , , ,			
IN DESIGNATION OF TRANSPORTER OF OF AN		CAS				
III. DESIGNATION OF TRANSPORTER OF OIL AN Nume of Authorized Transporter of OII or Condensate		Address (C	ive address s	o which approved copy of	this form is to i	be sent)
Name of Authorized Transporter of Casingnead Gas or Di	ry Gas 🗍	Address (C	ive address t	o which approved copy of	this form is to t	be sentj
Unit Sec. 'Tw	p. 'Rge.	ils gas actu	aily connecte	d? When		
If well produces oil or liquids,	· · ·		-	i		
give location of tanks.	÷	1				
If this production is commingled with that from any other l	ease or pool,	give commi	ngling order	number:		
NOTE: Complete Parts IV and V on reverse side if ne	cessary.	18				
VI. CERTIFICATE OF COMPLIANCE			OIL CO	DNSERVATION DIV	/ISION	
				CEPT 1 10	62	
I hereby certify that the rules and regulations of the Oil Conservation been complied with and that the information given is true and complete in the order and belief	1 Division have to the best of	APPRO	VED		<u>20</u> , 19	••
my knowledge and belief.		BY	ORIGIN	AL SIGNED BY JERRY	SEXPON	·
		TITLE		DISTRICT I SUPERVISO		

TITLE _

11

Paul Phis (Signature)

President

(Tule) (Date)

This form is to be filed in compliance with RULE 1104.

If thus 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 FULE 111.

All sections of this form must be find out completely for all a able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporten or other such change of condition.

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