

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
**NORTH LEA JOINT VENTURE**

Address  
**P.O. Box 866816 PLANO, TX 75086**

Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☐ Change in Ownership

Change in Transporter of:  
☒ Oil  
☐ Casinghead Gas

☐ Dry Gas  
☐ Condensate

Other (Please explain)

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>FEDERAL "A"</b>	Well No. <b>4</b>	Pool Name, including Formation <b>BOUGH DEVONIAN</b>	Kind of Lease State, Federal or Fee <b>FEDERAL</b>	Lease No.
Location Unit Letter <b>L</b> : <b>2300'</b> Feet From The <b>SOUTH</b> Line and <b>990'</b> Feet From The <b>WEST</b> Line of Section <b>13</b> Township <b>-9-S</b> Range <b>-35-E</b> , NMPM, <b>LEA</b> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>PRIDE PIPELINE COMPANY</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 2436 ABILENE, TX 79604</b>					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit <b>L</b>	Sec. <b>13</b>	Twp. <b>9</b>	Rge. <b>35</b>	Is gas actually connected? <input type="checkbox"/>	When

If this production is commingled with that from any other lease or pool, give commingling order numbers

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.

**NORTH LEA JOINT VENTURE**

(Signature)

**ALLEN L. ARNOLD, AGENT**

(Title)

**OCTOBER 5, 1987**

(Date)

OIL CONSERVATION DIVISION

APPROVED **0073 1987**, 19

BY **ORIGINAL SIGNED BY JERRY SEXTON**

**DISTRICT I SUPERVISOR**

TITLE

This form is to be filed in compliance with RULE 1164.

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 casinghead.

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