

OIL CONSERVATION DIVISION
P. O. BOX 2086
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-79
Format 06-01-83
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DISTRIBUTION	
SANTA FE	
P.O.	
U.S.G.P.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
KWB Property Management, Inc.
Address
c/o Oil Reports & Gas Services, Inc., P.O.Box 763, Hobbs, NM 88241
Reason(s) for filing (Check proper box)
☐ New Well
☐ Recompletion
☒ Change in Ownership
Change in Transporter of:
☐ Oil
☐ Dry Gas
☐ Casinghead Gas
☐ Condensate
Other (Please explain)
Effective 4/1/84

If change of ownership give name and address of previous owner John R. Parish, Box 763, Hobbs, NM 88241

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "M"	Well No. 1	Pool Name, Including Formation South Denton Wolfcamp	Kind of Lease State, Federal or Fee State	Lease No. E 1384-1
Location Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line of Section 36 Township 15S Range 37E NMPM Lea 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"/> Shell Pipe Line Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910, Midland, TX 79701			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Tipperary Resources Corporation	Address (Give address to which approved copy of this form is to be sent) 500 W. Illinois, Midland, TX 79701			
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 3	Twp. 15S	Rge. 37E
Is gas actually connected?		When		
Yes		5/1/70		

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.

Henry Valle
(Signature)

Agent
(Title)

8/30/84
(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 31 1984 19
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
TITLE _____

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

135-1000

AUG 30 1984

O.C.D.
HODGE OFFICE