## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

00. 0F (SP760 20)	****	
PISTRIBUTE		
SANTA PE		
FILE		
V.S.G.A.		
LAND OFFICE		
TRAMPORTER	OIL	
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PROBATION OFFICE		

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

Form C-104 Revised 10-01-78 Formet 08-01-83 Page 1

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND MATURAL

1.	AUTHORIZ	CATION TO	IKANS	PORTOR	- AND NATU	RAL GAS		
Corporation ENERCAP Corporation						· · · · · · · · · · · · · · · · · · ·		
16945 Northchase Dr., Ressen(s) for filing (Check proper box)	Ste. 17	700 F	our Gi	reenspo	int Plaza		Texas 77	060
New Well	Character 1	Franconter of			Other (Please explain)			
Recognistion	Out.	, remindred et		y Ges		name change		
Change in Ownership	<b></b>	heed Cos	<b>—</b>	Corporation to ENERCAP Corporation.				cion.
If change of ownership give name ADDE	UESS CHAI	NGE FROM	: 460	)6 PM 1	.960 W. Si	te. 220 Hou	iston, Texa	s 77069
II. DESCRIPTION OF WELL AND L					· · · · · · · · · · · · · · · · · · ·			
Lease Name	1 1	ool Name, Inc	•			Kind of Lease		Lease No.
O'Connell Ranch Unit	9	Wildca	t, Chi	nle	<u> </u>	State, Federal or Fe	• State	L 6331
Unit Letter A : 540	Feet From	The N		• and	560	Feet From The	Е	
Line of Section 15 Townsh	1) 11N	N Ro	ange .	25E	, МИРМ,	Guada	lupe	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS								
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)								
Name of Authorized Transporter of Casingheed Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)								
of well produces oil or liquids, que location of tanks.	it Sec.	Twp.	Ree.	le que ac	tually connects	d7 When		
If this production is commingled with the	at from eny	other lease	or pool,	give coma	ningling order	number		
NOTE: Complete Parts IV and V or	reverse sid	le if necessar	ry.					
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION								
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.								
				TITLE			مِن الْمَمْ فِي الْمُعْمَّا فَا	
This form is to be filed in compliance with RULE 1104.					1104.			
(Signature)  Operations Analyst  If this is a request for allowable for well, this form must be accompanied by teets taken on the well in accordance w			r A tabulatina ni	I the demication				
(Tule)			All sections of this form must be filled out completely for allowable on new and recompleted wells.					
6-9-89 (Date)				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.				
				Seg	erate Forms	C-104 must be fi	led for each po	of in multiply