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ARTESIA, OFFICEForm C-104
Revised 10-01-78
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Page 1STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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SANTA FE	<input checked="" type="checkbox"/>	
FILE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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LAND OFFICE		
TRANSPORTER	<input checked="" type="checkbox"/>	<input type="checkbox"/>
OIL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GAS	<input checked="" type="checkbox"/>	<input type="checkbox"/>
OPERATOR		
PERMATION OFFICE		

I.

Operator Pelto Oil Company

Address One Allen Center, Suite 1800, 500 Dallas Street, Houston, TX 77002

Reason(s) for filing (Check proper box)

☐ New Well ☐ Change in Transporter of:

☐ Recompletion ☐ Oil ☐ Dry Gas

☐ Change in Ownership ☒ Casinghead Gas ☐ Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner _____**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <u>Citgo State</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Twin Lakes-San Andres Assoc.</u>	Kind of Lease State, Federal or Fee	State <u>TX</u>	Lease No. <u>K-2803</u>
Location					
Unit Letter <u>J</u> ; <u>1650</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>East</u>					
Line of Section <u>36</u> Township <u>8S</u> Range <u>28E</u> , NMPM, <u>Chaves</u> 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"/> <u>The Permian Corporation</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1183 Houston, TX 77252-1183</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Pelto Oil Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>500 Dallas Street, Suite 1800, Houston, TX 77002</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>0</u>	Sec. <u>36</u>
	Twp. <u>8S</u>	Rge. <u>28E</u>
Is gas actually connected? <u>yes</u>		When <u>5-75</u>

If this production is commingled with that from any other lease or pool, give commingling order number: 12-24-86

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCEI 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.

Bernie Malson (Signature)
Production Administration Manager
(Title)

October 12, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 20 1986, 19 _____

BY Les A. Clements
Supervisor District II

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 allow-
able 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.