

RECEIVED BY

SEP -5 1986

O. C. D.
ARTESIA, OFFICEForm C-104
Revised 10-01-78
Format 06-01-83
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

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.O.S.	<input type="checkbox"/>
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/>
OIL	<input checked="" type="checkbox"/>
GAS	<input type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PERMITS OFFICE	<input type="checkbox"/>

I. Operator
Pelto Oil Company ✓

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

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	<input checked="" type="checkbox"/> Change in Transporter of:	<input type="checkbox"/> Other (Please explain)
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name State CH Com	Well No. 2	Pool Name, including Formation Twin Lakes-San Andres Assoc.	Kind of Lease State, Federal or Fee State	Lease No. OG-6716
Location				
Unit Letter E	: 1850	Feet From The North	Line and 990	Feet From The West
Line of Section 36	Township 8S	Range 28E	NMPM,	Chaves 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"/>	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation	P.O. Box 1183 Houston, TX 77252-1183
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Liquid Energy Corporation	P.O. Box 4000, The Woodlands, TX 77380
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit: E Sec: 36 Twp: 8S Rge: 28E	yes 5-4-75 Post ID-3

If this production is commingled with that from any other lease or pool, give commingling order number: 9-12-86

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

chy LT: NHC

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.

Bernie Malson (Signature)
Production Administration Manager
(Title)

August 15, 1986

(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 8 1986
Original Signed By _____, 19_____
By Les A. Clements
Supervisor District II
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 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 filled for each pool in multiply
completed wells.