RECEIVED

| STATE OF NEW MEXICO | | | | SEP 20 '88 | Form C-104 Revised 10-01-78 | ÷ |
|--|---|---|---|--|--|----------------|
| DISTRIBUTION | 01 | LCONSERVA | ATION DIVISIO | NO.C.D. | Format 06-01-83 Page 1 | |
| | | P. O. BO | | ANNESHA, OFFICE | | |
| V.LE VV | ç | SANTA FE. NEV | W MEXICO 87501 | Prevenuent, German | | |
| LAND OFFICE | - | , | | | | |
| TANAPORTER OIL GAS | | REQUEST FO | R ALLOWABLE | | | |
| OFERATOR | | | ND | • | | |
| PROPATION OFFICE | AUTHORIZ | ZATION TO TRANS | PORT OIL AND NATU | IRAL GAS | | |
| • | | | | | | |
| Operator | | | | | | |
| KELT OIL & GAS INC. | | | ······ | | | |
| Address | | | | | | |
| P.O. BOX 1493 ROSM | ELL NEW N | HEXICO 882C |)1 | | | |
| Reason(s) for filing (Check proper box) | | | Other (Pleas | e explain) | | <u> </u> |
| | | T | | | | |
| New Well | Change in " | ronsporter bi: | | | | |
| New Well Recompletion | Change in ² Oil | · · · · · · · · · · · · · · · · · · · | ry Gas Eff | ective 5 AUG | 88 | |
| Recompletion Change in Ownership Change of ownership give name | 011 | head Gas C | ondensate | | 88 88240 | |
| Recompletion Schange in Ownership Change of ownership give name and address of previous owner | AMOCO PRO | ihead Gas C | PANY P.O. BOX 6 | 8 HOBBS NM, | 88240 | |
| Recompletion Recompletion Change in Ownership f change of ownership give name ind address of previous owner | AMOCO PRO | DUCTION COMP | PANY P.O. BOX 6 | 8 HOBBS NM, | 88240 | |
| Recompletion Change in Ownership f change of ownership give name nd address of previous owner I. DESCRIPTION OF WELL AND | AMOCO PRO | ihead Gas C | PANY P.O. BOX 6 | 8 HOBBS NM, | 88240 | 920 |
| Recompletion Change in Ownership f change of ownership give name address of previous owner I. DESCRIPTION OF WELL AND Lease Name State JA Lecation Unit LetterF : 1980 | Oil Casing AMOCO PRO LEASE Well No. F 1 Feet From | DDUCTION COMP | PANY P.O. BOX 6 Cormation Crawn Gas | Kind of Lease State, Federal or Fee Feet From The | 88240 State L-4 est | |
| Recompletion Change in Ownership f change of ownership give name and address of previous owner I. DESCRIPTION OF WELL AND Lease Name State JA Lecation Unit Letter | AMOCO PRO | DDUCTION COMP | ondensate PANY P.O. BOX 6 Cormation Crawn Gas | Kind of Lease State, Federal or Fee Feet From The | 88240 State L-4 est | |
| Recompletion Change in Ownership Change of ownership give name I. DESCRIPTION OF WELL AND Lorase Name State JA Location Unit Letter | AMOCO PRO | DUCTION COMP DOUCTION COMP DOUCTION COMP Dool Name, Including F Lost Lakes St The North Lin th Range 2 IL AND NATURAL | Ondensale PANY P.O. BOX 6 Cormation Crawn Gas ne and 1980 29 East , NMPN L GAS | Kind of Lease State, Federal or Fee Feet From The A. Chaves | 88240 State L-4 est | 920 |
| Recompletion Change in Ownership f change of ownership give name and address of previous owner I. DESCRIPTION OF WELL AND Lease Name State JA Lecation Unit Letter | AMOCO PRO | DUCTION COMP DOUCTION COMP Dool Name, Including F Lost Lakes St The North Lin th Range 2 | ondensate PANY P.O. BOX 6 Cormation Crawn Gas ne and 1980 29 East , NMPN LGAS Address (Give address | Kind of Lease State, Federal or Fee Feet From The A. Chaves | 88240 State L-4 est | 920 County |
| Recompletion Change in Ownership Change of ownership give name ind address of previous owner | AMOCO PRO | DUCTION COMP DOUCTION COMP DOUCTION COMP Dool Name, Including F Lost Lakes St The North Lin th Range 2 IL AND NATURAL | ondensate PANY P.O. BOX 6 Cormation Crawn Gas ne and 1980 29 East , NMPN LGAS Address (Give address P.O. Box 1183 | 8 HOBBS NM, Kind of Lease State, Federal or Fee Feet From The 4. Chaves to which approved copy 8 Houston, TX | 88240 State L-4 est of this form is to be set 77001 | (920 County |
| Recompletion Change in Ownership Change of ownership give name ind address of previous owner I. DESCRIPTION OF WELL AND Lease Name State JA Lecation Unit Letter F : 1980 Line of Section 36 Towns IIL. DESIGNATION OF TRANSPO Nome of Authorized Transporter of Cill | AMOCO PRO | DUCTION COMP DOUCTION COMP DOUCTION COMP Dool Name, Including F Lost Lakes St The North Lin th Range 2 IL AND NATURAL | ondensate PANY P.O. BOX 6 Cormation Crawn Gas ne and 1980 29 East , NMPN LGAS Address (Give address P.O. Box 1183 | Kind of Lease State, Federal or Fee Feet From The A. Chaves | 88240 State L-4 est of this form is to be set 77001 | (920 County |
| Recompletion Change in Ownership Change of ownership give name ind address of previous owner | AMOCO PRO | DUCTION COMP DOUCTION COMP DOUCTION COMP Dool Name, Including F Lost Lakes St The <u>North</u> Lin th <u>Range</u> 2 HL AND NATURA | ondensate PANY P.O. BOX 6 Cormation Crawn Gas ne and 1980 29 East , NMPN LGAS Address (Give address P.O. Box 1183 | 8 HOBBS NM, Kind of Lease State, Federal or Fee Feet From TheW 4. Chaves to which approved copy 3. Houston, TX to which approved copy | 88240 State L-4 est of this form is to be set 77001 | (920 County |
| Recompletion Change in Ownership Change of ownership give name ind address of previous owner I. DESCRIPTION OF WELL AND Lease Name State JA Lecation Unit Letter F : 1980 Line of Section 36 Towns HL. DESIGNATION OF TRANSPO Nome of Authorized Transporter of Cill Western Oil Transpor Name of Authorized Transporter of Casin Cities Service | AMOCO PRO | DUCTION COMP DOUCTION COMP DOUCTION COMP Dool Name, Including F Lost Lakes St The <u>North</u> Lin th <u>Range</u> 2 HL AND NATURA | ondensate PANY P.O. BOX 6 Formation trawn Gas ne and 1980 29 East , NMPN L GAS Address (Give address P.O. Box 1183 Address (Give address | Kind of Lease State, Federal or Fee Feet From The A. Chaves to which approved copy Houston, TX to which approved copy Tulsa OK, 7 | 88240 State L-4 est of this form is to be set 77001 of this form is to be set | (920 County |
| Recompletion Change in Ownership Change of ownership give name and address of previous owner Change of ownership give name State of previous owner DESCRIPTION OF WELL AND Lecation Unit Letter | AMOCO PRO | head Gas DDUCTION COMP Cool Name, Including F Lost Lakes St The North Lir th Range 2 IL AND NATURA Idensate X or Dry Gas | Ondensate PANY P.O. BOX 6 Cormation trawn Gas ne and 1980 29 East , NMPN L GAS Address (Give address P.O. Box 1183 Address (Give address P.O. Box 300 | Kind of Lease State, Federal or Fee Feet From The A. Chaves to which approved copy Houston, TX to which approved copy Tulsa OK, 7 | $\frac{88240}{\text{State}}$ | (920 County |

П

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.

andrew 2. hestrick

| (Signature) | | | |
|--------------------|--|--|--|
| Petroleum Engineer | | | |
| (Title) | | | |
| (14), SEP 88 | | | |
| (Date) | | | |

| | 司法国 |
|--|-----|
| | |

OIL CONSERVATION DIVISION

 SEP 2 1 1988
 19

 BY
 Original Signed By

| TITLE | Mike | Williams |
|-------|--|--|
| | الجرب بيرجيها فيد تجربها والمعارية مردحه كالمطارب والمشر ومعرا متحربي متعاولاتها | and the local division of the local division |

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despensival, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 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 transporten or other such change of condities

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

anta ang Nasara

RECEIVED

SEP 1 9 1988 OCTA HOBBS OFFICE