STATE OF NEW MEXICO ENERGY AND MUNERALS DEPARTMENT OF OF THE STREET DISTRIBUTION BARTA FE FILE V. CAND DFFICE TRAMPORTER OF ENATION OFFICE I	P. O. B SANTA FE, NE REQUEST FC	ATION DIVISIO DX 2000 W MEXICO 8750 DR ALLOWABLE ND FORT DIL AND NATU	RECEIVED BY SEP - 5 1986 RAL GAD. C. D.	C-104 ed 10-01-78 at 06-01-83 1
Pelto Oil Company	/		ARTESIA, OFFICE	
Address One Allen Center, S Reesen(s) for filing (Check proper box) New Well Recompletion Chonge in Ownership	<b>m</b> . <b>m</b>	Street, Houston Other (Please ondensete		
and address of previous owner II. DESCRIPTION OF WELL AND L Leese Name O'Brien "E" Location Unit Letter A : 330 Line of Section 1 Townshi	Veil No. Pool Name, Including F 7 Twin Lakes-Si Feel From The North Lin	an Andres Assoc.	_ Feet From The _ East	Lease No.
DESIGNATION OF TRANSPOR Nome of Authorized Transporter of Cil & The Permian Corporation Name of Authorized Transporter of Cosingh Liquid Energy Corporati	or Condensale	Address (Give address t P.O. Box 1183 Address (Give address t	• which approved copy of this for <u>Houston, TX</u> 77252- • which approved copy of this for The Woodlands, TX	n is to be sent; -1183
If well produces oil or liquids, Uni		Is gas actually connecte yes		
If this production is commingled with th NOTE: Complete Parts IV and V on VI. CERTIFICATE OF COMPLIANCE hereby certify that the rules and regulations of wen complied with and that the information giv by knowledge and belief.	reverse side if necessary. the Oil Conservation Division have		DNSERVATION DIVISION	9-13-86 - chy bT:NRC al Signed By Giogents
Bernie Maled Bernie Malson (Signature) Production Administration Manager (Tule) August 15, 1986 (Dete)		TITLE <u>SUPERVISOR</u> , DISTRICT II Supervisor District if This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or desperatively 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.		