••••			_	<u> </u>		Ţ
		Γ	RECEIVED BY			
			AANY OF THOSE			
			MAY 05 1986			
STATE OF NEW MEXICO			0. 6, 9,			
ENERGY AND MINERALS DEPARTMENT		L.,	ARTESIA,			
DISTRIBUTION					Form C-10 Revised 10	
SANTA FE	OIL CONSERVATION DIVISION				Format 06-01-83 Page 1	
File U.S.G.S.	P. O. BOX 2088 SANTA FE, NEW MEXICO 87501				·	
LAND OFFICE						λ .
OPERATOR BAS	REQUEST FOR ALLOWABLE				•	
PROBATION OFFICE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
Cpersior				URAL GAS		•
Burk Royalty	Co.					
Address DO Por II DDCI						·····
PO Box "BRC" Recoson(s) for filing (Check proper box)	wichita F	alls, Tex	tas <del>76703</del> 763		······	•
New Well	Change in Transpo	ster of:	Other (Pleas	e explain)		
Recompletion			ry Gas	•		••• • • • • •
XX Change in Ownership	Casinghead G	•• <u> </u>	ondensate		•	· · ·
change of ownership give name () nd address of previous owner	arnel t	ipe &	Supply, 6	Ber 1037 A	ARTESIA	NM.
DESCRIPTION OF WELL AND LE			()	•		•
State	Well No. Pool Nar 1 Dou		en Associated	Kind of Lease		Lease No.
Location				State, Federal or Fee	State	K-4321
Unit Letter;;;	Feel From The	South Lin	• and1650	Ea	st	· · · · ·
Line of Section 1 Township	158	Range	29E , NMPM	 Ch	aves	-
I DESIGNATION OF THANGDOR						County
II. DESIGNATION OF TRANSPORT	or Condensate	<u>) NATURAI</u>	Address (Give address	to which approved com	of this form is	
Navajo Refining Co.		1	N. Freeman	Ave., Artesia	NM 882	10
Name of Authorized Transporter of Casinghe	ad Gas or Dr	y Gas	Address (Give address	to which approved copy	of this form is i	o be sent)
f well produces oil or liquids,	Sec. Twp	p. Rge.	Is gas actually connecte	rd? When	Post	<u> 70-3</u>
ive location of tanks.					6-6 640	- 8 6
this production is commingled with the	t from any other le	ease or pool,	give commingling order	number:		
OTE: Complete Parts IV and V on	reverse side if ne	cessary.				
. CERTIFICATE OF COMPLIANCE				ONSERVATION D		
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 ny knowledge and belief.			APPROVED	JUN 419		
			AFFROVED	· · · · ·		19
			BY	Original Signe	d By	·
7 02 1 1			TITLE Supervisor District []			
And M. Lihrel	Fred M. Ly	nch		be filed in complian	ce with RULE	
Signature) Petroleum Engineer			If this is a requ well, this form must tests taken on the w	eat for allowable for be accompanied by well in accordance w	a tabulation of	the deviation
(Title)				this form must be fill		
May 1, 1986 (Date)			Fill out only S	ections I. II. III an	d VI for chan	ses of owner,
		1	well name or number,	or transporter, or oth	er such change	of condition.
		11	Separate Forma	C-104 must be file	d for each no.	al in multiple