

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF SECTORS DESIGNED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.O.J.	
LAND OFFICE	
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATION	<input checked="" type="checkbox"/>
PROMOTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

APR 07 '89

REQUEST FOR ALLOWABLE
AND

O. C. D.
ARTESIA, OFFICE

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Lynx Petroleum Consultants, Inc.	
Address P. O. Box 1666, Hobbs, NM 88241	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recombination <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gashead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate Effective 03/01/89

If change of ownership give name and address of previous owner **McClellan Oil Corp., P. O. Drawer 730, Roswell, NM 88201**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Marlisue Queen Unit Tract 1	Well No. 4	Pool Name, including Formation Double L Queen, Asso	Kind of Lease State	Lease No. K-6772
Location Unit Letter K ; 2480 Feet From The South Line and 2285 Feet From The West Line of Section 24 Township 14S Range 29E , NMPM, Chaves County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

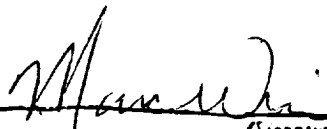
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Pride Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2436, Abilene, TX 79604
Name of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) 820-M Plaza Ofc. Bldg, Bartlesville, OK
If well produces oil or liquids, give location of tanks. Unit F Sec. 24 Twp. 14S Rge. 29E	Is gas actually connected? Yes When 5-18-86 14004 Unknown

If this production is commingled with that from any other lease or pool, give commingling order number: **Part ID-3**

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

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.



(Signature)
President
(Title)
04/05/89
(Date)

APPROVED **APR 10 1989**, 19_____
BY **Original Signed By**
Mike Williams
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 allowable 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.