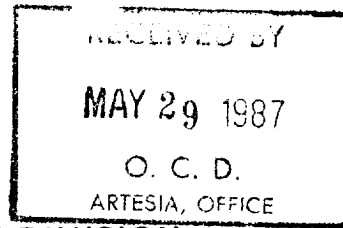


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501



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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Armstrong Energy Corporation

Address P. O. Box 1973, Roswell, New Mexico 88201

Reason(s) for filing (Check proper box)

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

Other (Please explain) Change of Operator to Armstrong Energy Corporation

If change of ownership give name and address of previous owner Aceco Petroleum Corporation, 2106 W. Richey, Artesia, New Mexico 88210

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>High Lonesome Penrose Unit</u>	Well No. <u>5</u>	Pool Name, including Formation <u>High Lonesome Queen</u>	Kind of Lease <u>State, Federal or Fee Federal</u>	Lease No. <u>NM05523</u>
Location				
Unit Letter <u>J</u>	<u>2310'</u>	Feet From The <u>South</u>	Line and <u>2310'</u>	Feet From The <u>East</u>
Line of Section <u>15</u>	Township <u>16 South</u>	Range <u>29 East</u>	<u>NMPM,</u>	Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Water Injection Well</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>Post #10-3</u> <u>6-12-87</u> <u>cky op</u>

If this production is commingled with that from any other lease or pool, give commingling order number: _____

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]
(Signature)
President
(Title)
May 27, 1987
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 8 1987, 19 _____

BY Original Signed By
Mike Williams

TITLE Oil & Gas Inspector

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.