			RECEIVEL .	зY			
			OCT 22198	5		· · · · · · · · · · · · · · · · · · ·	
STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT							
	DD. OF CODICS DECEIVED				O. C. D. ARTESIA, OFFICE		
DISTRIBUTION BANTA PE	OIL CONSERVATION DIVISION Format 06-01-83						
	P. O. BOX 2088						
LAND OFFICE	SANTA FE, NEW MEXICO 87501						
TRANSPORTER OIL	PERIEST FOR ALL OWARD F						
	REQUEST FOR ALLOWABLE AND						
<u>I.</u>	I. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS						
Operator Nacional Distance de la constructione de la construction de l							
Aceco Petroleum Company							
2106 West Richey Ar	tesia,New M	exico	88210				
Reason(s) for filing (Check proper box) New Well Other (Please explain)							
Recompletion	Change in Transporter of: O(1) Dry Gas						
Change in Ownership	Casinghead Gas	~~	Condensate				
If change of ownership give name Delmer W. Berry Box 512 Alto, New Mexico 88312							
II. DESCRIPTION OF WELL AND LI	Well No. Pool Narie	. Including	Formation	Trind of	1		
Davis Federal 2 High Lonesome Queen State, Federal or Fee Fed Log68677							
E 1980							
Feet From The							
Line of Section 15 Township 165 Range 29E , NMPM, Eddy County							
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS							
National Definition of Condensate Address (Give address to which approved copy of this form is to be sent)							
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)							
						Post ID-3	
If well produces oil or liquids, give location of tanks,		Roe.	Is gas octually connect NO	led?	When	10-25-85	
						- Ghy op	
If this production is commingled with that from any other lease or pool, give commingling order number:							
VI. CERTIFICATE OF COMPLIANCE				-			
I hereby certify that the rules and regulations of t been complied with and that the information giver	APPROVED OCT 251985 19						
my knowledge and belief.		BYOriginal Signed By Les A. Clements					
	TITLE Supervisor District 11						
Harderanil	This form is to be filed in compliance with RULE 1104.						
(Signature) If this is a request for allowable well, this form must be accompanied					llowable for	a newly drilled or deepened	
riestdent tests taken on the well in accordance with AULE 111.						Ith RULE 111.	
<u>8/22/1985</u>			All sections of this form must be filled out completely for allow- able on new and recompleted wells.				
(Date)	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 multipl completed wells.							