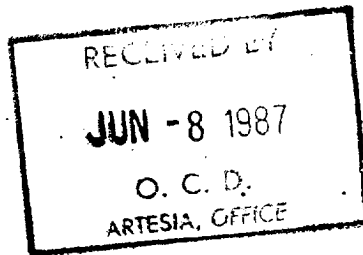


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL <input checked="" type="checkbox"/> GAS <input checked="" type="checkbox"/>
OPERATOR	
PROMOTION OFFICE	



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 Stallworth Oil & Gas, Inc. Fossil Fuels, Inc.
Address P.O. Box 479, Dallas, TX 75221-0479
Reason(s) for filing (Check proper box)
☐ New Well ☐ Change in Transporter of:
☐ Recompletion ☒ Oil ☐ Dry Gas
☐ Change in Ownership ☐ Casinghead Gas ☐ Condensate
Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Etz</u>	Well No. <u>4</u>	Pool Name, including Formation <u>Sq Lake Grayburg San Andres</u>	Kind of Lease State, Federal or Foreign <u>Federal</u>	Lease No. <u>C0219424</u>
Location Unit Letter <u>I</u> : <u>1980</u> Feet From The <u>south</u> Line and <u>660</u> Feet From The <u>east</u> Line of Section <u>25</u> Township <u>16</u> Range <u>30</u> N.M.P.M. <u>Eddy</u> 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"/> <u>Navajo Refining Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Drawer 159, Artesia, NM 88210</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>No Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>Post ID-3</u> <u>6-12-87</u> <u>by BT:PER</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>P</u>	Sec. <u>25</u>
	Twp. <u>16</u>	Rge. <u>30</u>
	Is gas actually connected? <u>No</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.

Murray E. Helmers
(Signature)
Executive Vice President
(Title)
June 1, 1987
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 10 1987, 19
BY Original Signed By
Les A. Clements
TITLE Supervisor District II

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.