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RECEIT O BY	
STATE OF NEW MEXCO	
ENERGY AND MINERALS DEPARTMENT O. C. D.	
DISTRIBUTION	Form C-104 Revised 10-01-78
P. O.	VATION DIVISION Format 08-01-83 BOX 2088 Page 1
	EW MEXICO 87501
TRANSPORTER OIL - REQUEST F	
PROMATION OFFICE	OR ALLOWABLE AND
Operator	ISPORT OIL AND NATURAL GAS
J. CLEO THOMPSON	
4500 REPUBLIC BANK TOWER	
Reeson(s) for filing (Check proper box)	Other (Please explain)
Change in Transporter of Recompletion Oil	Change of elase name only from
Change in Ownership Casinghead Gas	Condensate Etz 'E' #4
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	
Well No. Pool Name, Including	
D i cco	
Unit Letter A ; 660 Feet From The East Li	ine and 660 Feet From TheNorth
Line of Section 34 Township 16 Range	30 , NMPM, Eddy County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	
Navajo Refinery Company	Address (Give address to which approved come of the first
Name of Authorized Transporter of Casinghead Gas (1) of Dry Cas	P.O. Box 159, Artesia, NM 88210 Address (Give address to which approved copy of this form is id 45 sent)
Phillips 66 Natural Gas Company	Bartlesville, Oklaboma 74004
aive location of tanke. 10:34 16:30	
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.	Rosted ID-3
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION OF well name
I hereby (entify 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 kightlede and half	APPROVED AUG AA 1900
my knewledge and belief.	Original Signed By BYLos A. Claments
	TITLE Supervisor District 14
- Jalenie Z. Woonly	This form is to be filed in compliance with AUSE 1104.
(Signature)	If this is a request for allowable for a newly drilled by deepened well, this form must be accompanied by a table of the second
(Title)	All sections of this form must be fitted out one lifeth f
July 28, 1986	Fill out only Sections 5 11 12 - A to day
	well name or number, or transporten or other such changes of condition. Separate Forms C-104 must be filed for each \$661 in multiply completed wells.

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