STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT AUG 11 1986

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O. C. D. ARTESIA, OFFICE

OIL CONSERVATION DIVISION P. O. BOX 2088

Form C-104 Revised 10-01-78 Format 08-01-83

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DISTRIBUTION			
SANTA FE			
FILE		-	l.
V.B.G.A.		I_	
LAND OFFICE			
TRAMIPORTER	DIL	13	
	BAD		
OPERATOR		<u> </u>	
PROBATION OFFICE			

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator J. CLEO THOMPSON 4500 REPUBLIC BANK TOWER Other (Please explain) Resson(s) for liling (Check proper box) Change of lease name only from Change in Transporter of: Oil Dry Gas Leonard #6 Casinghead Gas Condensate Change In Ownership If change of ownership give neme and address of previous owner..... II. DESCRIPTION OF WELL AND LEASE

Well No. | Pool Name, Including Formation Kind of Lease Ledee Ho. Tract 15 6 Square Lake Grayburg San Andres State, Federal or Fee Federal NM-02/127 Location

Unii Leller E : : 660	Feet From The	West_Line	and 1,98	<u>0</u> F••	et From The	North		
Line of Section 34 Tox	wnahip 16	Range	30	, имрм,			Eddy	County
III. DESIGNATION OF TRANSI	PORTER OF OIL A	ND NATURAL	VIGIGES ICIAA	address to whi	ch approved cop	y of this form i	1 10 be 11	ent <i>j</i>
Name of Authorized Transporter of Oil (2) or Condensate P.O. Box 159, Navajo Refinery Company P.O. Box 159, Address (Give address				k 159, Art	esia, NM	88210		
Name of Authorized Transporter of Ca Phillips 66 Natura	al Gas Company		Bartles	111e Ok1	lahoma 740			
it well produces oil or liquids, dive location of tanks.	Unit Sec.	Twp. Rqe.	is gas actuall	y connected?	I			, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
If this production is commingled wi	th that from any oth	er lease or pool,	give comming	ling order num	peu			
NOTE: Complete Parts IV and	V on reverse side if	necessary.				K	111 640. 1000 - 10	ン-ご 86
VI. CERTIFICATE OF COMPLIANCE			OIL CONSERVATION DIVISION on well named					
I hereby certify that the rules and regular been complied with and that the informat	ions of the Oil Conserva ion given is true and con	ation Division have aplete to the best of	APPROVE	Original Sign	ed By	<u></u>	_, 19 ~_	

my knowledge and belief.

(Tille)

July 28, 1986

If this is a request for silowable for a newly drilled or despended well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with NULE 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 transporten or other such change of condition.

TITLE Supervisor District II

Separate Forms C-104 must be filed for each pool in multiply completed wells.

This form is to be filed in compliance with RULE 1104.