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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator J. CLEO THOMPSON	
Address 4500 REPUBLIC BANK TOWER	
Reason(s) for filing (Check proper box)	Other (Please explain) Change of lease name only from Jackson State #8
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name USLU Tract 25	Well No. 8	Pool Name, including Formation Square Lake Grayburg San Andres	Kind of Lease State, Federal or Fee	State New Mexico	Lease No. B-6973
Location Unit Letter <u>N</u> : <u>1,980</u> Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>South</u> Line of Section <u>36</u> Township <u>17 16</u> Range <u>30</u> , NMPM, <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"/> Navajo Refinery Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma 74004	
If well produces oil or liquids, give location of tanks.	Unit <u>N</u>	Sec. <u>36</u>
	Twp. <u>16</u>	Rge. <u>30</u>
	Is gas actually connected? <u>no</u> When _____	

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.

Valerie L. Woody
(Signature)
AGENT
(Title)
July 28, 1986
(Date)

OIL CONSERVATION DIVISION *dry well name*APPROVED AUG 22 1986, 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 multiple completed wells.

Posted ID-3
8-22-86