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STATE OF NEW MEXICO	OCT 17 1984
ENT - LEARS MINERALS DEPARTMENT	O. C. D. Form C.154
	ARTESIA, OFFICE and 10.0178
	Page 1
SANTA FE, NEW	/ MEXICO 87501
REQUEST FOR	RALLOWABLE
The STORE PRAYER	
AUTHORIZATION TO TRANSF	PORT OIL AND NATURAL GAS
Coperatur	
Dwight A. Tipton	
c/o Oil Reports & Gas Services, Inc., P. O. Bo	
Change in Transporter of:	Other (Please explain)
	Y Gas Effective 10/1/84
Image in Ownership Casinghead Gas Co	indensate
If change of ownership give name	
and returess of previous owner Southland Royalty Co., 21 Desta Drive, Midland, TX 79701	
II. DESCRIPTION OF WELL AND LEASE	
Lears tinno Well No. Pool Name, Including Fo	Sinte Federal or Fee
Robinson Unit Tr. 4 16 Maljamar Gray	burg San Andres State 0G-5939
Unit Letter P :660 Feet From TheSouth Line	and 660 Feet From The East
Line of Section 36 Township 165 Range	31E , NMPM, Eddy County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	
Name ci Authorized Transporter of Oli XX or Condensate	Addiess (Give address to which approved copy of this form is to be sent)
Navajo Refining Company	P. O. Box 159, Artesia, NM 88210 Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company	4001 Penbrook, Odessa, Texas 79762
If well produces oil or liquids, give location of tanks. M 31 166 327	Is gas actually connected? When 3
	Yes 1/14/60 74
If this production is commingled with that from any other lease or pool, a	
NOTE: Complete Parts IV and V on reverse side if nccessary.	NAT UNAT
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED OCT 18 1984
been complied with and that the information given is true and complete to the best of my knowledge and belief.	BYORIGINAL SIGNED
	BY LARRY BROOKS
	TITLEGEOLOGIST NMOCD
lan will then	This form is to be filed in compliance with RULE 1104.
(Signature)	If this is a request for allowable 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 AULE 111.
Agent(Title)	All sections of this form must be filled out completely for allow-
10/16/84	Fill out only Sections I, II, III, and VI for changes of owner,
(Date)	well name or number, or transporter, or other such change of conditional
N	Separate Forms C-134 must be filed for each pool in multiply completed wells.

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