STATE OF NEW MEXICO							
DISTRIBUTION	ECEIVED BY	IL CONSERV	ATION		J	Form C-104 Revised 10-01 Format 06-014	
BANTA PE	OV -6 1986		X 2088		•	Page, 1	
FILE	W -0 1900	SANTA FE, NET		0 97501			• ·
LAND OFFICE		SANTA FE, NE		0 87501			
OIL	O. C. D. ARTESIA, OFFICE	REQUEST FO					
OPERATOR		-	R ALLUWA	BLE			
PROPATION OFFICE	AUTHOR	ZATION TO TRANS					
I.	AUTION	IZATION TO TRANS	PURI UIL	AND NATURA	al gas		
Operator							
Remuda Operatin	o Company 🦯	,					
Address	<u>c company</u>						
• •	C	M231	70701				
301 N. Colorado		Midland, Ix.					
Reason(s) for filing (Check proper				Other (Please e	xplain)		
New Well	Change in	Transporter of:					
Aecompletion	ou	: 📃 Þ	ry Gas				
XX Change in Ownership	Cast:	nghead Gas	ondensate				
f change of ownership give nar address of previous owner_ I. DESCRIPTION OF WELL Lease Name	AND LEASE	1 and Gas Corp	•		a Bldg., Midlar	nd, Tx. 7	
	Herrino.	Poor requirer merading r			ind of Lease	-	Lease No.
Pan American 13 Star	te l	Mesa Queen	Haza	<u> </u>	tate, Federal or Fee St	ate	139941
Location Unit Letter <u>A</u> ; 6	60 Feet Fro	n The <u>East</u> Lin	e and <u>66</u>	0	Feet From The <u>Nor</u>	th	
Line of Section 13	Township	16S Range	31E	, NMPM,	Eddy		County
		х 19 24	*******	••••••••••••••••••••••••••••••••••••••			
III. DESIGNATION OF TRAI		indenaute	, GAS Address (G	ive address to s	which approved copy of s	his form is to	be sentj
Name of Authorized Transporter of	Casinghead Gas	or Dry Gas [Address (G	ive address to i	which approved copy of t	his form is to	be sent)
Phillips Petrole	eum Co.			Bartlesvi	lle. Oklahoma	Po	et ID-3
If well produces of or liquids,	Unii Sec.	Twp. Rge.		ally connected?		ų.	-24-82
give location of tanks.	!!!			Yes	1-1	7-66	
this production is commingled	with that from an	other lease or pool	aive commi	aling order n	umber		- Harman
NOTE: Complete Parts IV an			Life commu	igning order in			
I. CERTIFICATE OF COMPI	JANCE	******		OIL COM	SERVATION DIVI	SION	
hereby certify that the rules and regu			APPRO	/ED	APR 2 3 1987	, 1	9
been complied with and that the information given is true and complete to the best of my knowledge and belief.			av.		' Original Signed	By	

 $\|$

Neilt	inh
	(Signature)

Agent
(Tille)
11/05/86
(Date)

APPROVED	AI II & 0 1301	
8Y	' Original Signed By	
	Les X. Methods	
TITLE	Supervisor, Desciet 11	

ι.,

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 iti.

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.