

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION O. C. D.
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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DEC 27 1991

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator W.O.G., Inc. ✓

Address P. O. Box 1813, Midland, TX 79702

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) EFFECTIVE DATE: 1/1/92
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Change in Ownership	<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 Cheyenne Resources, Inc., P.O. Box 1813, Midland, TX 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Crow Flats Fed Com Unit</u>	Well No. <u>1</u>	Production Including Formation <u>Wolfcamp</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>NMNM12/11</u>
Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>30</u> Township <u>16S</u> Range <u>28E</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"/> <u>Scurlock Permian Corporation</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 4648, Houston, TX 77210-4648</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips Petroleum Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>9C1 Adams Building, Bartlesville, OK 74004</u>
If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>30</u> Twp. <u>16S</u> Rge. <u>28E</u>	Is gas actually connected? <u>Yes</u> When <u>2/90</u>

If this production is commingled with that from any other lease or pool, give commingling order number: filed ID-3

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.

Rb Walker
(Signature)
President
(Title)
12/17/91
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 9 1992
BY Mike Williams
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 deviate 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.