## RECEIVED BY MAR 05 1986 STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT O. C. D. ARTESIA, OFFICE ----DISTRIBUTION SAMTA FE FILE U.S.O.A. LANG OFFICE

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

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OIL CONSERVATION DIVISION P. Q. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

OPERATOR PROBATION OFFICE					
Ι.		IZATION TO TRAN	SPORT OF AND HAT		
. PHIL	LIPS PETROL	EUM COMPANY	/		
Address 4001	l Penbrook	Odessa, T	exas 79762 .		
Reason(s) for filing (Check proper t	ox)		Other (Pleas	se explain)	
Mem Aeri		Transperter of:	Effoct	ive date	
Recompletion		<b>=</b>	Dry Gas ETTECT	•	
Change in Ownership	VV Cast	ngheed Ges	Concension 1-1-00	,	
If change of ownership give name and address of previous owner	<u>., </u>		· · · · · · · · · · · · · · · · · · ·		
II. DESCRIPTION OF WELL A	ND LEASE	Pool Name, Including	Formstion	Kind of Lease	Lease No.
Burch A A 3 &	2	[	son-SR-Q-G-SA	State, Federal or Fee Federal	LC028793-
Location		ur ayour g ouck	3011 011 Q 3 071	, , , , , , , , , , , , , , , , , , ,	
L	1980	South t	ine and 660	Feet From The West	
Unit Letter;;					
Line of Section	Township	17S Range	. 30E , NMP	м, Eddy	County
Name of Authorized Transporter of Navajo Refining Companions of Authorized Transporter of Phillips 66 Natural Go	ou M or c ny-Pipeline Cosinghood Gos M	Division Or Dry Gas	P. 0. Box 159  Address (Give address 4001 Penbrook	of the state of this form in the state of this form in the state of th	88210
If well produces oil or liquids, give location of tanks.	Unit Sec	19 17S 30E	Is gas actually connec	when 03-01-62	
If this production is commingled	with that from ar	ny other lease or poo	l, give commingling ord	er number	
NOTE: Complete Parts IV an					Richard 11, 3
VI. CERTIFICATE OF COMPL				CONSERVATION DIVISION MAR 7 1986	3 : 14-80 . januarite
I hereby certify that the rules and regulated complied with and that the inform	lacions of the Oil C	omercacion Division has not complete to the best o	APPROVED	Original Signed By	_, 19
my knowledge and belief.	izdon given is due z	M complete to the best	BY	Les A. Clements	
			TITLE	Supervisor District II	<u> </u>
The state of the s	<b>~</b>	V 1-1	This form is	to be filed in compliance with RU	LE 1104.
An Omson	. <u>/</u>	Ken Johnson	If this is a re	quest for silowable for a newly dr	illed or deepened
Production Records S	upervisor		tests taken on the	at be accompanied by a tabulation well in accordance with RULE of this form must be filled out com	111.
January 24, 1986	Title)		able on new and	ecompleted wells.	P

(Dete)

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 filled for each pool in multiply completed wells.