	NO. OF COPIES RECEIVED				
	DISTRIBUTION	NEW MEXICO OIL CO	ONSERVATION COMMISSION	13 Car Share Calland	
	SANTA FE		FOR ALLOWABLE	Supersedes Old C-104 and C-	
	FILE 2		AND	Ellective 1-1-65	
	U.S.G.S. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAUL 3 0 1984				
	TRANSPORTER GAS V			ARTESIA, OFFICE	
	OPERATOR ./	-	· • • • • • • • • • • • • • • • • • • •	ARTESIA, OFFICE	
1	PRORATION OFFICE	1			
-	Operator				
		Belco Development Corporation			
	10000 Old Katy Road; Houston, Texas 77055				
	Reason(s) for filing (Check proper box)  Other (Please explain)				
	New We!! Change in Transporter of:				
	Recompletion Oil Dry Gas				
	Change in Ownership Casinghead Gas Condensate				
	change of owners up give name HOLLY ENERGY, INC.; 717 N.Harwood, #2600; Dallas, Tx. 75201				
	and address of pre lous owner		· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,	
11.	ESCRIPTION OF WELL AND LEASE  Lease Name   Well No.   Pool Name, Including Formation   Kind of Lease   Lease No.				
	) =			ler Fee Federal LC054280	
	Location		· · · · · · · · · · · · · · · · · · ·	70054200	
	Unit Letter I : 165	O Feet From The South Line	e and 410 Feet From	The East	
	20 =	170	20E	F 11-	
	Line of Section 20 To	wnship 17S Range	.30E , NMPM,	Eddy County	
ш.	DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
	Name of Authorized Transporter of Oil x or Condensate Address (Give address to which approved copy of this form is to be sent)				
	Navajo Refining Compa	iny - Pepeline Diversion	P.O. Drawer 159, Artes Address (Give address to which appro	ia, N.M. 88210	
	$\Lambda$				
	Conoco	Unit Sec. Twp. P.ge.	Is gas actually connected? Wh	en // // // // // // // // // // // // //	
	give location of tanks.	20 17 30	Yes	Igel 1161	
	If this production is commingled wi	th that from any other lease or pool,	give commingling order number:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Res'v. Diff. Res'	
	Designate Type of Completic	on – (X)			
	Date Spudded .	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top O!I/Gas Pay	Tubing Depth	
	Lievelions (DF, ARB, AT, GR, etc.)	Name of Frontening Lorination	1 00 000 7 47	rosing sopin	
	Perforations		•	Depth Casing Shoe	
		TURING CASING AND	CEMENTING RECORD		
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
		<del> </del>			
•,	TECT DATA AND REQUEST F	OR ALLOWARIE (Text Time be of	for recovery of total volume of load oil	and must be equal to or exceed top allo	
٧.	Oll, WELL able for this depth or be for full 24 hours)				
	Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas l	(II. etc.)	
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
		-		1 8 1 66.	
	Actual Prod. During Test	Oil-Bble.	Water - Bbis.	Gas-MCF (J <sup>u</sup> )	
i			<u> </u>	1	
	GAS WELL				
	Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (5hut-in)	Choke Size	
VI.	CERTIFICATE OF COMPLIANCE		OU CONSERVA	ATION COMMISSION	
	Control of Control		nu 3 1 1984		
	I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				
			ORIGINAL SIGNED BY LARRY BROOKS		
			GEOLOGIST - NMOCD		
			TITLE  This form is to be filed in compliance with RULE 1194.		
	Carl M. Houses		If this is a request for allo	wable for a newly drilled or deepen	
	(Signature)		well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.		
	Frod. Sudt		All sections of this form m	ust be filled out completely for silc	
	7 27 5/1 (Title)		able on new and recompleted w	ells.	

Fill out only Sections I, II. III, and VI for changes of own well name or number, or transporter, or other such change of conditi

Separate Forms C-104 must be filed for each pool in multiprompleted wells.

(Date)