## JUL 17 '89

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			V
SANTA FE		7	
FILE		V	
U.0.0.4.			
LAND OFFICE			
TRANSPORTER	OIL		/
	GAB		
OPERATOR		V	
PEOMATION OF	KE		

O. C. D.

ARTESIA, OFFICE

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND MA

l	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
Operator	<del>/</del>			
Premier Production Co.	.1/	•		
Address				
P.O. Box 1246, Artesia	a, NM 88210			
Reason(s) for filing (Check proper box)		Other (Please explain)		
New Well	Change in Transporter of:			
Recompletion	O11	Dry Gas		
Change in Ownership	Casinghead Gas	Condensate		
I change of ownership give name Sol	uthland Royalty Co			
II. DESCRIPTION OF WELL AND L	EASE Temp. Well No.   Pool Name, Including	ADANGUNE! Formation Kind of Lease No.		
Cissler "A"	4 Fren (SR)	State, Federal or Fee Fed. LC_056616_H		
Location				
Unit Letter F : 1980	) Feet From The North	ine and 1980 Feet From The West		
2.2	1.7.5	207		
Line of Section 23 Townshi	ip 17S Range	30E , NMPM, Eddy County		
III. DESIGNATION OF TRANSPOR	TER OF OIL AND NATUR.	AL GAS		
Name of Authorized Transporter of Oil \( \sum \) or Condensate \( \sum \) Address (Give address to which approved copy of this form is to be sent)				
exas-New Mexico Pipeline P.O. Box 2528, Hobbs, NM 88241				
Name of Authorized Transporter of Casinghead Gas & or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
Phillips Petroleum Co	again a communication of the contract of the c	4001 Penbrook, Odessa, TX 79762		
If well produces oil or liquids,	It Sec. Twp. Rgs.	Is gas actually connected? When		
give location of tanks.	C <u> </u>	E 1 9 21 60		
If this production is commingled with that from any other lease or pool, give commingling order number:				
$\mathcal{M}_{\mathcal{M}}$				
NOTE: Complete Parts IV and V on reverse side if necessary.				
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION		
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		APPROVED JUL 2 1 1989 19		
		ORIGINAL SIGNED BY		
my knowledge and belief.		BY MIKE WILLIAMS		
		TITLE SUPERVISOR, DISTRICT IT		
		1		
		This form is to be filed in compliance with RULE 1104.		
(Signature)		If this is a request for allowable for a newly drilled or despenses well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.		
owner//operator (Tule)		All sections of this form must be filled out completely for allowable on new and recompleted wells.		
7/1 /89 (Date)		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.		
± <sup>™</sup>		Separate Forms C-104 must be filed for each pool in multiply completed wells.		