RECEIVED BY MAR -9 1987 O. C. D. ARTESIA, OFFICE

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUT	_		
SAMTA PE			
FILE	V		
V.S.G.S.	1		
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		,
OPERATOR .			
PROBATION 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

PROBATION OFFICE			AND	-			
1	AUTHO	RIZATION TO TRAN		D NATI	URAL GAS		
Operator		·					
Hondo Oil & Gas Compa							
Address Compa	пу						
P. O. Box 2208; Rosw	-11 N-	V 99201	•				
Reason(s) for filing (Check proper box)	err. Ne	w Mexico 8820					
New Well	Change in Transporter of:					-	
Recompletion	o:1		Change in Operator name				
X Change in Ownership	Cast		Condensate Effective March 1, 1987				
If change of ownership give name AD				·			
and address of previous ownerAR	CO Oil	and Gas Compa	ny – Divisi	on of	Atlantic	Richfield Com	pany
Ρ.	O. Bo	x 1610, Midlan					
II. DESCRIPTION OF WELL AND L	EASE						
Losso Name	1 1	Pool Name, including			Kind of Lease		Lease No.
H.E. West B	12	Grayburg Jack	son-7R.Q.G.	S.A.	State, Federal o	Fee Federal	029426-В
Location							1 423 120 2
Unit Letter G: 1980	_ Feet Free	The North Li	ne and <u>1980</u>		_ Foot From The	East	
147774	170				_		-
Line of Section 9 Townshi	• 17S	Range -	31E	, NMPM	<u> </u>	Eddy	County
III. DESIGNATION OF TRANSPOR	· TED OF C	A A A A A A A A A A A A A A A A A A A					
Name of Authorized Transporter of Off	or Co	Menagie	L GAS	diene	a which approved	copy of this form is t	•
Texas-New Mexico Pipeline	Company	, –					
Name of Authorized Transporter of Casinghe	od Gds 💢	or Dry Gas	Address (Give a	K 4345	o MODDS . !	ew Mexico 882	240
Continental Oil Company			1		Hobbs, Ne		
If well produces oil or liquids, Uni	Sec.	Twp. Ree.	is das actnetty	CONNECTO	47 When	w Mexico 882	.40
give location of tante.	10	17S :31E	Yes		į	6-1-60	•
If this production is commingled with the	t from any	other lease or pool.	give communglin	e order	number		
NOTE: Complete Parts IV and V on							
The same of the sa	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	me ij necessary.	11			rés	# [ED] 3
VI. CERTIFICATE OF COMPLIANCE	:		#	OIL C	ONSERVATION	ON DIVISION -	5 30 8 7 Fra &p
I hereby certify that the rules and regulations of	Salan Oll Ca	B 1.1.1 1			MAR 1		U T
been complied with and that the information giv	ren is true an	d complete to the best of	APPROVE	·—	MAN I	0 1901	19
my knowledge and belief.			BY		Original Si	gned By	
					Les A. Cl	ements	
			TITLE		Supervisor	District H	-
Odna C No			This for	m is to	be filled in con	pliance with RULE	1104.
(Signature)	~~		If this is	s a reau	est for allowab	le for a newly delli.	
0 0	PRO	D SEC	Well, this los	m suet	be accempanie	d by a tabulation of	(the devices
(Title)		U SLC				be filled out comple	
022787		,	TOTA OF DAM	and rec	completed wells	•	•
(Date)			Fill out	only 3.	ections I, II, I of Vanaporten	II, and VI for chan or other such chang	ged of owner,
						lied for each po	
		İ	completed we	lla.		PA	in marriply