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ATATE OF NEW MEYICO				•					
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NERGY AND MINERALS DEPARTMENT							Form C-104		
P8. 07 COPIES SECTIVED	٠					•	Revised 10-01-78 Format 06-01-83		
DISTRIBUTION					ATION DIVISION RECEIVED				
FILE	× 2088								
U.\$.0.4.		SA	NTA FE, NEW	MEXIC	2 87501				
LAND OFFICE							<b>A</b>		
TRANSPORTER	REQUEST FC					LER 01. 9	FEB 01 '88		
UPERATOR J				CALLUMAI	, see				
PROMATION OFFICE	Alt		TION TO TRANSF	-	ND NATURA	I GAS O.C.D			
•	701	HUNILA				ANTESIA, DIFF	alle		
Operator	· · · · · · · · · · · · · · · · · · ·	نى يەربىيەت « نەن « مەن يەر مەر يەر مەر يەر يەر يەر يەر يەر يەر يەر يەر يەر ي	. /		<u>,</u>				
Trinity University	7 & C	llosu	it 🗸						
Adarvas									
P.O. Box 6A Loco	Hill	ls, N	.M. 88255						
Reoson(s) for filing (Check proper box)	- <u></u>			C	iher (Please ex	plain)			
New Well	Char	nge in Tro	insporter of:						
Recompletion		Oil	) Dr	y Gas					
X Change in Ownership		Casinghe	ad Gas 🗌 Co	ndensate					
				·····	ज . ज	ort Worth (	Tub Tower	<del></del>	
change of ownership give name Mi	archi	ison (	& Closuit T	-1. Su		ort Worth.		102	
ad address of previous owner					<u></u>			<u> </u>	
E DESCRIPTION OF WELL AND	LEASE								
Lease Name	Well	No.   Pot	ol Name, Including Fo	ormation	۲. ۲	nd of Lease		Lease No.	
State "A"	1	<b> </b> . (	Grayburg Ja	ackson ⁵	R-Q-G- 50	ate, Federal or Fee	State B	-3014	
ocation			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					
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Unit Letter :;	! ee	t r tom 1				reet riona ine			
Line of Section 16 Towns	t	17S	Range	31E	, NMPM,	Eddv		County	
II. DESIGNATION OF TRANSPO	RTER	OF OIL	AND NATURAL	GAS					
Name of Authorized Transporter of Oil			nsate	Address /G	ve address to u	which approved copy o	of this form is to be	sent)	
Texas-New Mexico Pipe Line				P.O. Box 2528 Hobbs, N.M. 88240					
Name of Authorized Transporter of Casinghead Gas () or Dry Gas				Address (Give address to which approved copy of this form is to be sent)					
Conoco, Inc.				P.O.	Box 1959	Midland, 7	lexas 797	02	
	Unii	Sec.	Twp. Rge.		ally connected?		/		
if well produces oil or liquids, if yive location of tanks.	$\mathbf{L}$	16	17S 31E	Y Y	es	1	Post ID	. 7	
	**** 6-0		her lesse or pool			imber:	3-36-3	38	
this production is commingled with	thật iro	im any oi	her lease of pool,	Rive commu	iging older ne		0 · 0	<del>7</del>	
IOTE: Complete Parts IV and V	on reve	rse side	if necessary.					~	
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I. CERTIFICATE OF COMPLIAN	CE			1		SERVATION D	IVISION		
the third standard second s	e of the (	Dil Conte	vation Division have	APPRO		EB 2 4 1988	10		
hereby certify that the rules and regulations ten complied with and that the information	2 iven is t	rue and co	mplete to the best of	AFERO		- I Signed By			
y knowledge and belief.				BY	Origi	nal Signed By ike Williams			
, -					M	IKe Williams	•		
•	~			TITLE		Gas Inspector			
7 7	1/			Thie	form in to be	filed in compliant	C+ with RULE 11	104.	
62:4	-	<u> </u>				t for allowable for			
(Signalu	···					accompanied by a lin accordance wi		e deviation	
Agent		وي المراجع الم	[			•		v for allow	
(Title;				All sections of this form must be filled out completely for allow- able on new and recompleted wells.					
1-29-88				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 multiply completed wells.					
(Date)									
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