

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL	<input checked="" type="checkbox"/>
NAT	<input checked="" type="checkbox"/>
OPERATOR	
PRODUCTION OFFICE	

RECEIVED BY
AUG 20 1985
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 NATURAL GAS

I. Operator
Reading & Bates Petroleum Co. ✓

Address
2412 N. Grandview, Suite 201, Odessa, Texas 79761

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain) SI

Effective July 1, 1985

If change of ownership give name and address of previous owner DeltaUS Corporation, 3100 C, North "A" Street, Midland, Texas 79705

II. DESCRIPTION OF WELL AND LEASE

Lease Name Johnston State	Well No. 1	Pool Name, Including Formation Artesia Queen Grayburg SA	Kind of Lease State, Federal or Fee State	Lease No. OG-181
Location				
Unit Letter <u>K</u> : <u>1760</u> Feet From The <u>South</u> Line and <u>1592</u> Feet From The <u>West</u>				
Line of Section <u>30</u> Township <u>17S</u> Range <u>29E</u> , NMPM, <u>Eddy</u> Count				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

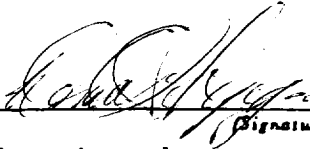
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Navajo Refining Company Pipeline Division</u>	<u>Artesia, New Mexico</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips Petroleum Company</u>	<u>4001 Penbrook, Odessa, Texas 79762</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>K</u> Sec. <u>30</u> Twp. <u>17</u> Rge. <u>29</u>	Yes July 27, 1965

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

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 my knowledge and belief.


(Signature)
Area Superintendent

(Title)

August 14, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 28 1985, 19

BY Original Signed By
Les A. Clements
TITLE Supervisor District II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

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 multiple completed wells.

Post ID-3
8-30-85
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