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ARTESIA, OFFICESTATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTForm C-104
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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
TRANSPORTER	<input type="checkbox"/>
OIL	<input type="checkbox"/>
GAS	<input type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input type="checkbox"/>

I. Operator Wilshire Oil Company of Texas

Address 200 North Harvey, Suite 717, Oklahoma City, Oklahoma 73102

Reason(s) for filing (Check proper box) Other (Please explain)

☐ New Well Change In Transporter of: Change of Operator SI

☐ Recompletion ☐ Oil ☐ Dry Gas

☒ Change In Ownership ☐ Casinghead Gas ☐ Condensate

If change of operator, give name and address of previous owner Phillips Petroleum Company, 4001 Penbrook, Odessa, Texas 79762

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Grayburg Deep Unit</u>	Well No. <u>9</u>	Pool Name, Including Formation <u>Undesignated Abo</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>LC-028784</u>
Location				
Unit Letter <u>P</u> ; <u>330</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u>				
Line of Section <u>24</u> Township <u>17S</u> Range <u>29E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<u>None</u>		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
<u>None</u>		
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
Is gas actually connected?	When <u>Part FD-3</u> <u>5-15-87</u> <u>chy. sp.</u>	

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.

W. D. Stancliffe (Signature)
Vice President, Engineering and Production
May 4, 1987 (Date)

OIL CONSERVATION DIVISION

APPROVED MAY 11 1987, 19____

BY Original Signed By
Les A. Clements
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 deviation 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 change 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.

