• STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

i

BANTA FE P. O. BO			TION DIVISION	RECEIVED	Form C-104 Revised 10-01-7 Format 06-01-6 Page 1	
FILE / U.S.G.J. / LAND OFFICE //			MEXICO 87501	SEP 08 '88		•
TRANSPORTER DIL V DPERATOR	REQU		ALLOWABLE	O. C. D. ARTESIA, OFFICE		
PADRATION OFFICE	AUTHORIZATION TO	D TRANSF	PORT OIL AND NATURAL	GAS		
Operator	۵- <u>مر ما جال مارون مارون می اور اور اور مارو</u> مرکز اور اور مرکز می اور اور اور اور مرکز می اور		······································			
DEKALB Energy Company	У	·				
Address						
800 Central, Odessa, Reeson(s) for filing (Check proper box)	Texas /9/61		Other (Please expl	aint		
New Well	Change in Transporter ol:					
Recompletion	OII Dry Cos Corporate			Name Change		
Change in Ownership	Casinghead Gas	C•	ndensaio		•	
If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND I	· · · · · · · · · · · · · · · · · · ·	<u>, 800 C</u>	entral, Odessa, Tex	as 79761		
Lease Name	Well No. Pool Name, In	ncluding Fe		t of Lease	T	Leose No.
Dunn B	26 Artesia	Queen C	Stayburg SA Store	•, Federal or Fee Fea	ieral	NM_5418
Line of Section 11 Towns		Range	28 , ммрм,	Eddy	lest	County
III. DESIGNATION OF TRANSPO Name of Authorized Transporter of Oli X	or Condensale		Azazoss (Give address to whi	ich approved copy of th	his form is to i	be senij
Navajo Refining Company Neme of Authorized Transporter of Casing		••	P.O. Box 175. Arte Address (Give oddress to wh	ala, New Mexic ich approved copy of it	0 88210	be sentj
Phillips Petroleum Compa	any		4001 Penbrook, Ode	essa. Texas 797	760	
If well produces oil or liquids,	Jnil Sec. Twp.	Rqe.	is gas actually connected?	When		
give location of lanks.	A 10 18	28	Yes	December	1966	
If this production is commingled with	that from any other lease	e or pool.	give commingling order num	iber 100T	IDN	3
NOTE: Complete Parts IV and V o	on reverse side if necess	sary.			5-10-3 UKG	λp.
VI. CERTIFICATE OF COMPLIANCE	CE		14	SERVATION DIVI	SION 2	/
I hereby certify that the rules and tegulations 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.			APPROVED MAR BY Original S Mike Y	7 1989 Signed By Yellierus		D
			TITLE	······		
& L Dennie	R. L. Denne	Y	14	filed in compliance for allowable for a g		
Similar Chief Production Cle	re)		well, this form must be tests taken on the well	accompanied by a te	AULE 111.	the deviati
(Tule)	1		able on new and recomp		AAL CORDINI	TAT TOT BILO
<u>9-1-88</u> (Deie)	· 		well name or number, or i Separate Forma C-:	one I. II. 111, and V transporter, or other : 104 must be filed f	such change	of conditio
		1	I completed wells.			