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	RECEIVED BY		
STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT	JUN - 3 1987		
	O. C. D. ARIESIA-OFFICE- D.		Form C-104 Revised 10-01-78 Format 06-01-83
6ANTA FE		ATION DIVISION	Page 1
FILE		DX 2088 W MEXICO 87501	
TRANSPORTER OIL -	REQUEST FO	R ALLOWABLE	
PROBATION OFFICE		ND	
T.	AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS	
ACECO PETROLEUM COMPA	ANY /		······································
Address 2106 West Richey Stre	eet, Artesia, New Mexic	co 88210 Phone: 746-6	0156
Reason(s) for filing (Check proper box)		Other (Please explain)	·····
New Well	Change in Transporter of:		
Recompletion		ληγ Gas	
X Change in Ownership	Casinghead Gas	ondensole	
If change of ownership give name 7 and address of previous owner	Thomas K. Scroggin (To	msco Energy) P. O. Box N, An	rtesia, New Mexico 88210
II. DESCRIPTION OF WELL AND I	LEASE	· · · ·	
Lease Name	Well No. Pool Name, Including J		State L 3852
Gilmore State	1 Artesia-Quee	n- G-San Andres State, Federal or Fee	
	Feel From The South Li	ne and <u>1650</u> Feet From The	West
Line of Section 17 Townsh	hip 18 South Range	28 East , NMPM, Eddy	County
IIL DESIGNATION OF TRANSPOL	RTER OF OIL AND NATURA	LGAS	
Name of Authorized Transporter of Oll		Address (Give address to which approved copy	
Navajo Refining Pipeline Division P. O. Drawer 159, Artesia, New Mexico & Name of Authorized Transporter of Casinghead Gas cr Dry Gas Address (Give address to which approved copy of this form is to			
			Part Tn-3
If well produces oil or liquids, give location of tanks.	L 17 18 28	Is gas actually connected? When	6-12-87 chr. 09.
If this production is commingled with the	hat from any other lease or pool.	give commingling order number:	3.7
· · · · · · · · · · · · · · · · · · ·			، يون يو يون مين مين مركبي المركبين بين مركبي والم مارك والمركبين والمركبين المركبين والمركبين والمركبين المركبين و
NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	

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.

arr (Signature)

Partner

June 1, 1987

(Date)

APPROVED	JUN 1 0 1987	N .
BY	Original Signad By	
	Les A. Ciements	,
TITLE	Supervisor District H	

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

If this is a request for allowable for a newly drilled or deepenso 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 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.