STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

. ** (*** ***			
DISTRIBUTION			Z
SANTA FE		V	Z
FILE			
V.8.G.4.			
LAND OFFICE			
TRANSPORTER	이나		
	BAD		Z
OPERATOR		يذا	
PRORATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 RECEIVED age 1

U.S.G.S.	37	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		JAN 03'89	1
LAND OFFICE				JAN 05 0	,
TRANSPORTER GAS	7	REQUEST FOR	ALLOWABLE	**	
OPERATOR 1		AN		O. C. D.	~ F
PRORATION OFFICE	AUTHORIZATIO	N TO TRANSP	ORT OIL AND NATURAL GAS	ARTESIA, OFFI	CE
•		/		<u></u>	
GREENHILL PETROLEUM	CORPORATION \	<u>/</u>		<u> </u>	·
Address 16010 Barker's Point	Lane, Suite 3	25, Housto	n, Texas 77079		
Reason(s) for filing (Check proper box,)		Other (Please explain)		
New Well	Change in Transpo	orter of:		1 /1 /00	
Recompletion	O11	Dri	, Gaa Effective	1/1/89	
Y Change in Ownership	Casinghead C	;as 🔲 Co	ndensate		
					•
If change of ownership give name	Texaco, Inc.	P.O. Box	728, Hobbs, New Mexi	co 88240	
and address of previous owner	reacco, race,	1101 2011			
	TO FEACE				
II. DESCRIPTION OF WELL AN	Well No. Pool No	ame, including Fo	ormation Kind of	_ease	Lease No.
	. 21		A =	oderal or Fee Fede	ral NM-033775
North Benson Queen Un	t 21 Benso	on Queen G	rayburg, North Store,		
Location	•		1000	- Woot	
Unit Letter N : 66	O Feet From The_	South Lin	• and <u>1980</u> Feet F	rom The West	
				D 1 1	County
Line of Section 27 To	wnship 18S	Range	30E , NMPM,	Eddy	County
IIL DESIGNATION OF TRANS	PORTER OF OIL AT	VD NATURAL	GAS		· form in to be conti
Name of Authorized Transporter of Of	or Condenso	ite 🔲	Address (Give address to which	approved copy of this	I losm is to be senil
INJECTION WELL					
Name of Authorized Transporter of Ca	singhead Gas Co	Dry Gas	Address (Give address to which	approved copy of this	form is to be sent)
Mame of Vernorraes transferres					
None	Unit Sec. T	Twp. Rge.	ls gas actually connected?	When	
If well produces oil or liquids,	Onit 1540.	,		ì	POST ID:
give location of tanks.	<u>i </u>		l No	<u></u>	1 12 00
If this production is commingled w	ith that from any othe	r lease or pool,	give commingling order number	1	1-13-89 CLB OR-
					CAGO OF
NOTE: Complete Parts IV and	V on reverse side if	necessary.			0, 9
			OIL CONSE	SIVIO NOITAVE	SION
VI. CERTIFICATE OF COMPLIA	ANCE		11	1 1 1989	
I beach assists that the rules and regular	tions of the Oil Conservat	ion Division have	APPROVED	1 1 1000	, 19
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			Lot Die		
my knowledge and belief.	•	•	II BY CHOING	Signed By	
· · · · · · · · · · · · · · · · · · ·				Williams	
			TITLE		
-2			This form is to be file	d in compliance	ith RULE 1104.
	Cana	Linton	If this is a request for		
- Comment of the Comm	nature)	. Dilleon	I wall, this form must be acc	companied by a tal	oulation of the deviati
(218)	30, W T /		tests taken on the well in	accordance with	RULE 111.

A. J.	Gene	Linton
(Signature)		
Production Coordinate	or	
(Title)		

(Date)

(713) 870-0606

December 28, 1988

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

Fill out only Sections I. II. III, and VI for changes of owns well name or number, or transporten or other such change of conditio Separate Forms C-104 must be filed for each pool in multip completed wells.