Appropriate District Office	Energy, Minerals and i	Nuclear Resources Dep nen	
P.O. Box 1980, Hobbs, NM 88240	OIL CONSE R	VALON DIVISION	See Instructions
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	P.O	8 Masilico 87504-2088	0CT 9 ' 90
000 Rio Brazos Rd., Aztec, NM 8741	¹⁰ REQUEST FOR ALLOW		ATION O. C. D.
	TO TRANSPORT	ND AUTHORIZA	ATION OFFICE
Decator Hanson Energy			Well API No.
Address	an Rd. ,Artesia, N.M.	. 0.2 0	
Reason(s) for Filing (Check proper box	x)	Cuher (Please explain)	
New Well	Change in Transporter of: Oil Dry Gas		10/1/90
Change in Operator	Casinghead Gas Condensate		
id address of previous operator	orexco Inc., Box 481	, Liosia, N.M. 8	8210
. DESCRIPTION OF WEL			
Twin Lakes	Well No. Pool Name, Inc. 10 Artes	B, G, SA	Kind of Lease Lease No. State, Federal or FeeS table BC47
ocation Unit Letter L	660	/	
		Line and 2030	Feet From TheLine
Section 28 Towns	hip 185 Range 28	, NMPM,	Eddy County
I. DESIGNATION OF TRA	NSPORTER OF OIL AND NAT	U. GAS	
ance of Authorized Transporter of Oil Navajo Refining (-XX or Condensate	Give address to which	approved copy of this form is to be sent)
ame of Authorized Transporter of Casi			rtesia, N.M. 88210
well produces oil or liquids,	Unit Sec. Twp. R		
e location of tanks.	L 28 18S 28		When ?
his production is comminated with the			
COMPLETION DATA	at from any other lease or pool, give commin	igli og oxde r number:	
COMPLETION DATA			eepen Plue Back Same Roely Diff Deale
COMPLETION DATA Designate Type of Completion	Oil Well Gas Well	Weil Workover D	Deepen Plug Back Same Res'v Diff Res'v
Designate Type of Completion	n - (X) Date Compl. Ready to Prod.		Deepen Plug Back Same Res'v Diff Res'v
Designate Type of Completion	Oil Well Gas Well	Weil Workover D	
Designate Type of Completion	n - (X) Date Compl. Ready to Prod.	i D. Ah	P.B.T.D.
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liance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111. All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each accel in the transporter.