STATE OF NEW MEXICO	MENT				Form C-104		
	• •				RECEIVED at 06-01-	-78 R3	
	01	L CONSERVA	TION DIVISIO	N	Page 1		
SANTA PE	0.	P. O. BOX					
FILE		SANTA FE, NEW					
U.8.d.8.		SANTA PE, NEW			JAN 03'89		
LAND OFFICE							
TRANSPORTER GAS		REQUEST FOR	ALLOWABLE		<b>O</b> . C. D.		
OPERATOR Y		AN		· 🔺	RTESIA, OFFICE		
PRONATION OFFICE	AUTHORI	ZATION TO TRANSP	ORT OIL AND NATUR	RAL GAS			
I.							
Operator							
GREENHILL PETROL	EUM CORPORATIO	ON V					
Address			····				
16010 Barker's P	oint Lane, Su	ite 325, Housto	on, Texas 77079				
Reason(s) for filing (Check prop	er box)		Other (Please	explain)			
New Well	Restants / to thing (Check proper cor)						
Recompletion		Dn	y Gas Effe	ctive 1/1/3	89		
Y Change in Ownership		ghead Gas Co	ndensate				
						· · · · · · · · · · · · · · · · · · ·	
If change of ownership give no and address of previous owner II. DESCRIPTION OF WELL	AND LEASE		728, Hobbs, Ne	W MEXICO 8	8240	1 1 scar No.	
Lease Name		Pool Name, Including Fo	otwartou		. F. Federal	I.C-	
North Benson Queen	Unit 13	Benson Queen Gr	rayburg, North	Sidte, rederat	redetat	<u> </u>	
Location			1				
T T	1980 Feet Fro	m The <u>South</u> Lin	• and <u>660</u>	Feet From Th	• <u>East</u>		
Unit Letteri							
Line of Section 29	Township 18	S Bange	30E , NMPN	4. <u>E</u>	ddy	County	
Line of Section 25							
III. DESIGNATION OF TR	ANCOOPTED OF	OT AND NATTIRAT	GAS				
Name of Authorized Transporter	ANSPORTER OF C	ondensale	Address (Give address	to which approve	d copy of this form is	to be sent)	
		—	P.O. Box 2528	uchha N	or Mariaa 882	40	
Texas-New Mexico F	<u>ipeline Compa</u>	ny (0096-0861) or Dry Gas	Address (Give address	10 which approve	id copy of this form is	to be sent)	
Name of Authorized Transporter	ot Castudueda Cas [			••	~ ~	- ID-3	
None			is gas actually connec	ted? When			
If well produces oil or liquids,	Unii Sec	Twp. Rge.	is das gernants course	1	. 1-,	13-89	
give location of tanks.		<u>28   185   30E</u>	No	ł.,			
If this production is comming	led with that from an	ny other lease or pool,	give commingling ord	er numberi	0	19 ap	
NOTE: Complete Parts IV	and V on reverse :	side if necessary.					
· · · · · · · · · · · · · · · · · · ·			11				

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.

Gene Linton						
(Signature)						
Production Coordinator						
(Thie)						
December 28, 1988						
(Date)						
(713) 870-0606						

## OIL CONSERVATION DIVISION

APPROVED	JAN 1 1 1989	
	Original Signed By	•
BY	Miko Williams	
TITLE		

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

If this is a request for allowable for a newly drilled or deepen well, this form must be accompanied by a tabulation of the deviati tests taken on the well in accordance with RULE 111.

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 owne well name or number, or transporter, or other such change of conditic

Separate Forms C-104 must be filed for each pool in multip completed wells.