## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	1740		
DISTRIBUTION			
SANTA PE		7	7
FILE		V	
U.1.G.4.			
LAND OFFICE			
TRANSPORTER	OIL	7	Z
	GAS		
OPERATOR		<b>'</b>	
PROBATION OFFICE			

## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78

JAN 03'89

REQUEST FOR ALLOWABLE O. C. D AND ARTESIA, OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator GREENHILL PETROLEUM CORPORATION 16010 Barker's Point Lane, Suite 325, Houston, Texas 77079 Other (Please explain) Reason(s) for filing (Check proper box) Change in Transporter of: New Well Effective 1/1/89 Dry Gas 011 Recompletion Condensate Casinghead Gas Change in Ownership Texaco, Inc., P.O. Box 728, Hobbs, New Mexico 88240 If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LEASE Legee No. Well No. | Pool Name, Including Formation Kind of Lease Legae Name State, Federal or Fee E-9262 State Benson Queen Grayburg, North North Benson Queen Unit Location Feet From The West 1980 Feet From The South Line and 1980 County Eddy NMPM 30E **18S** Range Township Line of Section IIL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL **GAS** Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil X or Condensate P.O. Box 2528, Hobbs, New Mexico 88240
Address (Give address to which approved copy of this form is to be sent) Texas-New Mexico Pipeline Company (0096-0861)
Name of Authorized Transporter of Casinghead Gas or Dry Gas None Is gas actually connected? Twp. Rge. Sec. Unit If well produces oil or liquids, 051 : 30E 18S 28 give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order numbers NOTE: Complete Parts IV and V on reverse side if necessary. OIL CONSERVATION DIVISION 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.

Que Jentes G	ene Linton
(Signature)	
Production Coordinator	
(Title)	
December 28, 1988	
(Date)	

(713) 870-0606

	JAN 1 1 1989	19
APPROVED_	Original Signed By	
BY	Mike 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 MULE 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 owns is name or number, or transporten or other such change of condition

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