	k	ECEIVED BY		
STATE OF NEW MEXICO		EC - 1.1986		
ENERGY AND MINERALS DEPARTMENT		O. C. D.	F	Form C-104
	A	RTESIA, OFFICE	F	Revised 10-01-78
DISTRIBUTION SANTA PE	OIL CONSERV		D NI -	ormat 06-01-83 Page 1
FILE		OX 2088		. • ·
LAND OFFICE	SANTA FE, NE	W MEXICO 8750		
TRANSPORTER OIL				
OPERATOR		OR ALLOWABLE	•	
PROMATION OFFICE	AUTHORIZATION TO TRANS	-	IRAL GAS	
]. Operator				
Ralph Nix Oil, Inc.				
P. O. Box 440, Artesia,	NM 88210			
Reoson(s) for filing (Check proper box)		Other (Picas	e expisinj	······································
New Well	Change in Transporter of:			
Change in Ownership		ry Gas ondensate	•	
		l		······································
If change of ownership give name Ralpland address of previous owner <u>Ralpl</u>	h Nix, P. O. Box 617,	Artesia, NM 8	8210	
II. DESCRIPTION OF WELL AND LE	ASE Well No. Pool Name, Including F	ormation	Kind of Lease	
Melaine	2 Atoka/Glorieta		State, Federal or Fee Fee	Lease No.
Location		u, 1030	ree ree	J
Unit Letter 0: 1650	_Feet From The _ East Lin	and 990	_ Feet From The South_	
· ·		· · · · · · · · · · · · · · · · · · ·		
Line of Section 26 Township	5 18 South Range	26 East , NMPM	Eddy	County
III DESIGNATION OF TRANSPORT		C 1 6		
Norme at Authorized Transporter of Oli	or Condensate		o which approved copy of this	form is to be sentj
Navajo Refining Co.		P.O. Box 159,	Artesia, NM 88210	
Name of Authorized Transporter of Casinghe	ad Gas 🕎 or Dry Gas 🗍		o which approved copy of this	form is to be sentj
Phillips 66 Natural Gas			hillips Bldg, Bartl	<u>lesville OK 7400</u>
If well produces oil or liquids, i Unit give location of tanks. J		ls gas actually connecte Yes	12-7-8	2 Post 70-3
f this production is commingled with the	t from any other lease or pool,	give commingling order	number:	12-5-86
NOTE: Complete Parts IV and V on	reverse side if necessary.			chy op
VI. CERTIFICATE OF COMPLIANCE			ONSERVATION DIVISIO	NC
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.		APPROVED	DEC 3 1986	
		BY	· Original Signed By	
			Les A. Clements	
		TITLE	Supervisor District 11	
		This form is to be filed in compliance with RULZ 1104.		
(Signature)		well, this form must	est for allowable for a new! be accompanied by a tabuin well in accordance with BUI	ation of the deviation
(Titie)		All sections of this form must be filled out completely for allow- able on now and recompleted wells.		
11-25-86 (Date)		Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other auch chings of condition.		
			C-104 must be filed for e	
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