	RECEIVED BY
	JUN 20 1985
STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT	O. C. D.
	ARTESIA, OFFICE Portsed 0.01-78
DISTRIBUTION OIL CONSERV	ATION DIVISION Format 06-01-83 Page 1
PILE P.O.	BOX 2088
LAND OFFICE	EW MEXICO 87501
UPERATOR V	OR ALLOWABLE AND
T AUTHORIZATION TO TRAI	SPORT OIL AND NATURAL GAS
Operator	
Premier Production Company	
324 West Main, Artesia, NM 88210	For Month of JUNE, 1985
Reoson(s) for filing (Check proper box)	Other (Please explain) 1000Bb1 test allowable
New Well Change in Transporter of:	Queen 2061-62 2 shots
	Dry Cas Penrose 2296-2451 8 shots
Change in Ownership Casinghead Gas	Condensate Grayburg 2530-2840 31 shots
If change of ownership give name and address of previous owner	
II. DESCRIPTION OF WELL AND LEASE	
Pogo Price I Turkey Track,	
Location	
Unit Letter	
Line of Section 26 Township 18 Range	29 , NMPM, Eddy County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Cil 🚺 of Condensate	Address (Give address to which approved copy of this form is to be sent)
The Permian Corporation	P.O. Box 1183, Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas or Dry Gas Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 410 1B HS&L Bldg., Bartlesville, OK 74000
Unit Sec. Twp. Rge.	Is gas actually connected? When
give location of tanks. N i 26 i 18 29	No
If this production is commingled with that from any other lease or poo	1, give commingling order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division has	JUN 24 1985
been complied with and that the information given is true and complete to the best of	
my knowledge and belief.	BYLes A. Clements
	TITLE Supervisor District 11
Premier Production C	This form is to be filed in compliance with RULE 1104.
(Slanature)	If this is a request for sllowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation
- Mani tone ontelow	tests taken on the well in accordance with AULE 111.
(fule)	All sections of this form must be filled out completely for allow- able on new and recompleted wells.
(Date)	Fill out only Sections I. II. III, and VI for changes of owner. well name or number, or transporter, or other such change of condition.

able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.

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