

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

RECEIVED BY

FEB -4 1987

O. C. D.  
ARTESIA, OFFICE

OIL CONSERVATION DIVISION

RECEIVED BY P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

JAN 23 1987

REQUEST FOR ALLOWABLE  
AND  
O. C. D.  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	✓
FILE	✓
U.S.D.S.	
LAND OFFICE	
TRANSPORTER	OIL ✓
	GAS ✓
OPERATOR	✓
PERMITS OFFICE	

I.

Operator ARCO Oil and Gas Company - Division of Atlantic Richfield Company ✓	
Address P. O. Box 1710, Hobbs, New Mexico 88240	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Operator name only - from Hondo Oil & Gas Company - effective January 01, 1987 <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Wilmar Federal	Well No. 5	Pool Name, including Formation <del>N. Shugart</del> Tamano Bone Springs	Kind of Lease State, Federal or Fee Federal LC	Lease No. 029389-B
Location				
Unit Letter <u>E</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u>				
Line of Section <u>4</u> Township <u>18S</u> Range <u>31E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Navajo Crude Oil Purchasing	Box 159, Artesia, N.M. 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
Conoco, Inc.	Box 460, Hobbs, N.M. 88240	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	K	4
	Twp.	Rge.
	18S	31E
Is gas actually connected?	When	
Yes	9/2/86	Post ID-3 2-13-87 by up name

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

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.

*Shirley Hickman*  
(Signature)  
Services Supv.  
(Title)  
January 22, 1987  
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 12 1987, 19  
Original Signed By  
BY Les A. Clements  
Supervisor District II  
TITLE \_\_\_\_\_

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

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

All sections of this form must be filled out completely for allowable 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.