is an event	IERGY AND MINERALS DEPARTM	ENT		RECEIVED	Form C-104
Answere Y P. O. BOX 2016 HEB 19 '68 SANTA FE, NEW MEXICO 87501 O. C. D. Answere train out of the second state of the seco					
SANTA FE, NEW MEXICO 87501 O. C. D. Anternation or an original state of the state		OIL CONSERV	ATION DIVISION		Page 1
	FILE V			10 19 88	
Transports Guide ARTESAL OFFACE ADD ADD ADD ADD ADD ADD ADD ADD Division of Atlantic Richfield Company ARTON Division of Atlantic Richfield Company ARTON Division of Atlantic Richfield Company Arteret P.O. Box 1710 Hobbs, New Mexico Provision Division of Atlantic Richfield Company Marcon Division Commany M	U.8.G.8.	SANTA FE, NE	W MEXICO 87501	- .	
REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Derevation growth ARCO OIL AND GAS COMPANY Division of Atlantic Richfield Company Network P.O. Box 1710 Hobbs, New Mexico 88240 Network in Growth and the second data data and the s				-	
Difference AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Developing AREAD P.O. Box 1710 Hobbs, New Mexico: 88240 Provision of Atlantic Richfield Company AREAD Provision of Atlantic Richfield Company Aready in Consenting Provision of Atlantic Richfield Company Company in Connership Company in Connership Company in Connership Control Net Reading Company State of Previous evert Not Hall Fred State of Atlantic Richfield Company State of Previous evert Interest Company Interest Company Interest Company Interest Company Interest Company	TRANSPORTER	REQUEST FO	OR ALLOWABLE	ARTESIA, OFFICE	
ARCO OIL AND GAS COMPANY UNHORIZATION TO TRANSPORT OIL AND NATURAL GAS Devision of Atlantic Richfield Company Address P.O. Box 1710 Here Vail Change in Transporter of: Precempletion Dry Ges Change of ownership give name Control Transporter of: Change of ownership give name Control Transporter of: Change of ownership give name Weil No. Pool None, Including Permetion Kilmar Fod S Control Transporter of Control Transporter of: State, Federal or Free Change of ownership give name Weil No. Pool None, Including Permetion Kilmar Fod S N. Shingarr Bone Springs State, Federal or Free Control Weil No. Pool None, Including Permetion Life and _660 Life of Section 4 Townskip 18S None of Authorsted Transporter of Coll AND NATURAL CAS Address Core depreced copy of his form to be scall None of Authorsted Transporter of Coll AND NATURAL CAS Address Towney of Authorsted Transporter of Countrol OF DY Ges None of Authorsted Transporter of Castendard Coll or Dry Ges Box 460 Heat preduces of the Head of Conservation Division have Free Precore Of Coll And Conservation Division have <td></td> <td></td> <td></td> <td></td> <td></td>					
ARDO OLS CONTANT Control	PRORATION OFFICE	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL	. GAS	
ARDO OLS CONTANT Control				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
Additive P.O. Box 1710 Hobbs, New Mexico 88240 Reston(s) for filing (Creat proper box/ New With Change in Transporter di: Dury Cas Other (Please captain) New With Change in Transporter di: Dury Cas Other (Please captain) Recompletion Other (Please captain) Change in Ownership Other (Please captain) Change in Ownership Other (Please captain) Change of ownership Contended Gas Change of ownership Contended Gas In Description Contended Gas Milling T Fed. S Levelian S Unit Litter E 1980, Feet From The Line of Section Township 18S Proof Marking Transporter of Other of Condensets CD Address (Gree address to which approved copy of this form is to be cant) Nome of Authorized Transporter of Other of Condensets CD Address (Gree address to which approved copy of this form is to be cant) Nome of Authorized Transporter of Other of the form is to be cant) Address (Gree address to which approved copy of this form is to be cant) Nome of Authorized Transporter of Other of the form is to be cant) Address (Gree address to which approved copy of this form is to be cant) None of Authorized Transporter of Casincheed Gas	ARCO OIL AND G				
P.O. Box 1710 Hobbs, New Mexico 88240 Cerement for ling (Create proper box) Change in Transporter of: Dry Ges Description Dry Ges Effective 3-1-88 Change of ownership give name Casincheed Gas Effective 3-1-88 Change of ownership give name Casincheed Gas Effective 3-1-88 Change of ownership give name Casincheed Gas Effective 3-1-88 Change of ownership give name Million Feed Losse Nome Address of previous owner State, Federal or Free Losse Nome Million Fed S N. Shugart Bone Springs State, Federal or Free Will Not Letter E 1980 Feet From The Line and 660 Feet From The Line of Section 4 Towmahlp 185 Range 31E NMPM, Eddy County IL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address Grave address to which approved copy of this form is to be stant) Box 460 Hobbs, New Mexico 88240 Q./ 1D-/ It was produces of antice or Condensate D Address Grave address to which approved copy of this form is to be stant) Box 460 Hobbbs, New Mexico 88240 Q./ 1D-/ <	والمحافظ المتحاط المراقع والمتعادية والمحاولة المتحد والمتحاف المتحد والمحاف المحاف والمحاف والمحاف والمحاف	Tancie Richfield Company			
Server(1) for filing (Creak proper bas) Change in Transporter of: Dry Ges Preconsistion B Gui Dry Ges Effective 3-1-88 Change in Ownership Casingheed Ges Condensate Effective 3-1-88 Change in Ownership Casingheed Ges Condensate Effective 3-1-88 Change of ownership Casingheed Ges Condensate Effective 3-1-88 Change of ownership State, Federal or Free Lesser No Line of Section 5 N. Shugart Bone. Springs State, Federal or Free Unit Letter		Hobbs New Merico 8824	۱ ۵		
New Well Change in Transporter of: Dry Ges Effective 3-1-88 Change of Ownership Condensate Effective 3-1-88 Change of Swnership give name Condensate Effective 3-1-88 Change of Swnership give name Well No. Food Address of Pervious owner DESCRIPTION OF WELL AND LEASE	Reason(s) for filing (Check proper b	inobbs; New Hexico 0024		lain)	
Chemye in Ownership Casinghead Gas Candensois Chemye in Ownership Casinghead Gas Candensois Chemye in Ownership Casinghead Gas Candensois Chemye in Ownership Casinghead Gas Casinghead Gas Casinghead Gas Chemye in Ownership Vell No. Pool Name, including Formation Kind of Lease States Name 5 N. Shugarr Bone Springs State, Federal or Free Ucases No. Unit Letter_E					
Change of ownership give name ichange of ownership give name ichange of previous owner IL DESCRIPTION OF WELL AND LEASE icrease Name Willmar Fed 5 N. Shugart Bone Springs State, Federal or Fee It may fed 5 N. Shugart Bone Springs Unit Letter E 1980. Feet From The N Line of Section 4 Township 185 Pange 31E . NMPM. Eddy County County II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Nome of Awthorised Transport of Call or Geodenastic & Der Pool. Box 1558 Breckenridge, Texas 76024 Name of Awthorised Transport of Call inc. P.O. Box 1558 Breckenridge, Texas 76024 Address (Give address to whick approved copy of this form is to be sent) Conoco Inc. Box 460 H well produces oil or itquide. K if 4 18 gas activally connected? When 2-2/86 Conoco Inc. Box 460 H well produces oil or itquide. K if 4 K if 4 18 gas activaly connected?	Recompletion		Ary Gas Effective	3-1-88	
Address of previous owner	Change in Ownership	Casinghead Gas 🥂 C	Condensate		
Address of previous owner				· · · · · · · · · · · · · · · · · · ·	
L DESCRIPTION OF WELL AND LEASE Well No. Pool Name, including Formation Kind of Lease Lease Name Sinte, Faderal or Fee LC Allmar End 5 N. Shugart Bone Springs Sinte, Faderal or Fee LC Unit Leiter					
serve Name Weil No. Pool Name, Including Permittion Xind of Lease Lease Lease Lease Lease Lease No. Villmar Fed	·	_			
Address County Unit Letter_E		ND LEASE	Second Long	d of Lenze	· · · · · · · · · · · · · · · · · · ·
Millmar Fod	Lease Name	Well No. Pool Name, including r			
Unit Letter_E		5 N. Shugart	Bone Springs		Fedl029389B
Line of Section 4 Township 18S Renge 31E . NMPM, Eddy County II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be seni) Address (Give address to which approved copy of this form is to be seni) Nome of Authorised Tronsporter of Oil or Condensate (ID) Address (Give address to which approved copy of this form is to be seni) KOCH 011 Co. Div of Koch Ind. Inc. P.O. Box 1558 Breckenridge, Texas 76024 Jame of Authorised Tronsporter of Cosinghead Gos or Dry Gos Address (Give address to which approved copy of this form is to be seni) Conco Inc. Box 460 Hobbs, New Mexico 88240 G. f. TU-f. I well produces oil or liquide. Unit Sec. Twp. Ree. Is gas actually connected? When S-2.6.6.6 I well production is commingled with that from any other lease or pool, give commingling order number: Image: Section of the Oil Conservation Division have Oil CONSERVATION DIVISION I certificATE OF COMPLIANCE OIL CONSERVATION DIVISION APPROVED FEB 2 4 1988 19 Mike Williams Mike Will matter (Girginal Kigature) (Title) This form is to be filed in compliance with AULE 1104. Services Superivisor (Title) (D	ocation				-
Line of Section 4 Township 185 Range 31E , NMPM, Eddy County II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be seni) Address (Give address to which approved copy of this form is to be seni) Nome of Authorized Transporter of Cesinghead Cas Address (Give address to which approved copy of this form is to be seni) Koch 011 Co. Div of Koch Ind. Inc. P.O. Box 1558 Breckenridge, Texas 76024 Address (Give address to which approved copy of this form is to be seni) Kome of Authorized Transporter of Cesinghead Cas or Dry Cas Address (Give address to which approved copy of this form is to be seni) Kome of Authorized Transporter of Cesinghead Cas or Dry Cas Address (Give address to which approved copy of this form is to be seni) Kome of Authorized Transporter of Cesinghead Cas or Dry Cas Address (Give address to which approved copy of this form is to be seni) Kone of Authorized Transporter of Cesinghead Cas was the form second proved copy of this form is to be seni) Dive to a seni) Conco Inc. Unit Sec. Twp. Ree Is gas activally connected? When 2-2.6 Count? It well production is commingled with the trans any other lease or pool, give commingling order number: ID ID 2.2.6 </td <td>Unit Latter;;</td> <td>1980 Feet From The N_L</td> <td>ne and <u>660</u> F</td> <td>eet From The <u>W</u></td> <td></td>	Unit Latter;;	1980 Feet From The N_L	ne and <u>660</u> F	eet From The <u>W</u>	
Line of dathorized Transporter of OIL OIL And ress (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of OIL or Condensate (D) Address (Give address to which approved copy of this form is to be sent) KOCH 0il Co. Div of Koch Ind. Inc. P.O. Box 1558 Breckenridge, Texas 76024 Kome of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Box 460 Hobbs, New Mexico. 88240 (D, / 1U-) Concoo Inc. K 4 185 31E YES If well production is commingled with that from any other lease or pool, give commingling order number: 9-2/86 (D) / 1.0.000000000000000000000000000000000					
Name of Authorized Transporter of OII or Condensate Image: Condensate Image: Condensate Image: Condensate Image: Condensate P.O. Box 1558 Breckenridge, Texas 76024 Name of Authorized Transporter of Casinghead Gae or Dry Gas Image: Condensate Image: Condensate <td></td> <td></td> <td></td> <td></td> <td></td>					
Name of Authorized Transporter of OII or Condensate Image: Condensate </td <td>Line of Section 4 T</td> <td>Fownship 185 Range</td> <td>31E , NMPM,</td> <td>Eddy</td> <td>County</td>	Line of Section 4 T	Fownship 185 Range	31E , NMPM,	Eddy	County
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Conoco Inc. Box 460 Hobbs, New Mexico 88240 G. 110-2 If well produces oil or liquide. Unit Sec. Twp. Rge. Is gas actually connected? When 2-2.4 address (Give address to which approved copy of this form is to be sent) If well produces oil or liquide. Unit Sec. Twp. Rge. Is gas actually connected? When 2-2.4 address (Give address to which approved copy of this form is to be filed in complete for tanks. If well produces oil or liquide. Unit Sec. Twp. Rge. Is gas actually connected? When 2-2.4 address (Give address (Give address for analy form is to be filed in complete for analy for analy form is to be filed for a newly drilled or deepenet. IOTE: Complete Parts IV and V on reverse side if necessary. OIL CONSERVATION DIVISION Approved FEB 2 4 1988 198 Markee Well that the information given is true and complete to the best of grant is to be filed in compliance with RULE 1104. If this form ust be filed in compliance with RULE 1104. If this form ust be filed in co				Eddy	County
Address (Give address to which approved copy of this form is to be sent) Nome of Authorized Transporter of Cosingheed Gos or Dry Gos Nome of Authorized Transporter of Cosingheed Gos or Dry Gos Conoco Inc. Box 460 Hobbs, New Mexico 88240 Box 460 Hobbs, New Mexico 88240 It well produces off or liquide, provide copy of this form is to be sent) If well produces off or liquide, provide copy of this form is to be sent) If well produces off or liquide, provide copy of this form is to be sent) If well produces off or liquide, provide copy of this form is to be sent) If well produces off or liquide, provide copy of this form is to be sent) If well produces off or liquide, provide copy of this form is to be sent) If well produces off or liquide, provide copy of this form is to be sent) If well produces off or liquide, provide copy of this form is to be sent) If well produces off or liquide, provide copy of the copy of	II. DESIGNATION OF TRAN	SPORTER OF OIL AND NATURA	L GAS		
Name of Autorities (1) and (1)	II. DESIGNATION OF TRAN Name of Authorized Transporter of C		L GAS Addiess (Give address to wh	ich approved copy of 1	his form is so be sensj
If well produces off or liquids. Unit Sec. Twp. Rge. is gas actually connected? When 2-26 & degree give location of tanks. K 4 18S 31E YES 9-2/86 degree degree <td>II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of</td> <td>SPORTER OF OIL AND NATURA</td> <td>LGAS Addiess (Give address to wh P.O. Box 1558 Brea</td> <td>ich approved copy of a ckenridge, Tex</td> <td>his form is so be sens) cas 76024</td>	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of	SPORTER OF OIL AND NATURA	LGAS Addiess (Give address to wh P.O. Box 1558 Brea	ich approved copy of a ckenridge, Tex	his form is so be sens) cas 76024
If well produces oil or liquids. K 4 185 31E YES 9-2/86 JUT Hitter This production is commingled with that from any other lease or pool, give commingling order number: Image: Complete Parts IV and V on reverse side if necessary. INCERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION hereby certify that the rules and regulations of the Oil Conservation Division have cen compliced with and that the information given is true and complete to the best of the with and that the information given is true and complete to the best of the form must be filed in compliance with AULE 1104. If this is a request for allowable for a newly drilled or deepense: (Signature) Services Supervisor (Title) February 17, 1988 (Date) (Date) (Date)	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C	SPORTER OF OIL AND NATURA	LGAS Address (Give address to wh P.O. Box 1558 Bre Address (Give address to wh	ich approved copy of the copy	his form is to be sent) (as 76024 his form is to be sent)
this production is commingled with that from any other lease or pool, give commingling order number: IOTE: Complete Parts IV and V on reverse side if necessary. I. CERTIFICATE OF COMPLIANCE hereby certify that the rules and regulations of the Oil Conservation Division have ten complied with and that the information given is true and complete to the best of y knowledge and belief. Marke Williams TITLE Oil & Gas Inspector This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepenet well, this form must be accompanied by a tabilation of the deviation test taken on the well in accordance with RULE 11104. All sections of this form must be filled out completely for allow- able on new and recomplied wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporten or other such change of condition. Separate Forms C-104 must be filled for each pool in multiply	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C	SPORTER OF OIL AND NATURA DII or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas	LGAS Add:ess (Give address to wh P.O. Box 1558 Bre Address (Give address to wh Box 460 Hobbs,	ich approved copy of 1 ckenridge, Tex ich approved copy of 1 New Mexico 8	his form is to be sent) xas 76024 his form is to be sent) 8240 6.710-3
IOTE: Complete Parts IV and V on reverse side if necessary. IOTE: Complete Parts IV and V on reverse side if necessary. I. CERTIFICATE OF COMPLIANCE Intervision of the Oil Conservation Division have the complete with and that the information given is true and complete to the best of y knowledge and belief. OIL CONSERVATION DIVISION APPROVED FEB 2 4 1988 Original Signed By Y Mike Williams TITLE Oil & Gas Inspector This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepenet well, this form must be accompanied by a tabulation of the deviation test taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable for a newly drilled out completely for allowable on new and recompleted wells. February 17, 1988 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 filled for each pool in multiply	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc.	SPORTER OF OIL AND NATURA DII or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge.	LGAS Address (Give address to wh P.O. Box 1558 Bre Address (Give address to wh Box 460 Hobbs, Is gas actually connected?	ich approved copy of 1 ckenridge, Tex ich approved copy of 1 New Mexico 8 when	his form is to be sent) xas 76024 his form is to be sent) 8240 6.710-3
I. CERTIFICATE OF COMPLIANCE hereby certify that the rules and regulations of the Oil Conservation Division have ten complied with and that the information given is true and complete to the best of y knowledge and belief. OIL CONSERVATION DIVISION APPROVED FEB 2 4 1988 , 19 Original Signed By BY Mike Williams OIL CONSERVATION DIVISION TTLE Original Signed By BY Mike Williams Mike Williams TITLE Oil & Gas Inspector TTLE Services Supervisor This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepenet well, this form must be accompanied by a tabulation of the deviation test testen 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 filled for each pool in multiply Separate Forms C-104 must be filled for each pool in multiply	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, pive location of tanks.	SPORTER OF OIL AND NATURA OIL Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E	L GAS Address (Give address to wh P.O. Box 1558 Bre Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES	ich approved copy of the copy	his form is to be sent) xas 76024 his form is to be sent) 8240 6.710-3
I. CERTIFICATE OF COMPLIANCE hereby certify that the rules and regulations of the Oil Conservation Division have cen complied with and that the information given is true and complete to the best of by knowledge and belief. OIL CONSERVATION DIVISION APPROVED FEB 2 4 1988 , 19 Original Signed By BY Mike Williams OIL CONSERVATION DIVISION Division have Original Signed By BY Mike Williams Mike Williams TITLE Oil & Gas Inspector Services Supervisor 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 test 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. February 17, 1988 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 filled for each pool in multiply	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, pive location of tanks.	SPORTER OF OIL AND NATURA OIL Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E	L GAS Address (Give address to wh P.O. Box 1558 Bre Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES	ich approved copy of the copy	his form is to be sent) xas 76024 his form is to be sent) 8240 6.710-3
1. CERTIFICATE OF CONFERENCE hereby certify that the rules and regulations of the Oil Conservation Division have cen complied with and that the information given is true and complete to the best of by knowledge and belief. APPROVED FEB 2 4 1988 Original Signed By BY Mike Williams Oil & Gas Inspector TITLE Oil & Gas Inspector Services Supervisor 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 test taken on the well in accordance with AULE 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 filled for each pool in multiply	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, give location of tanks.	SPORTER OF OIL AND NATURA Dil or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E with that from any other lease or pool,	L GAS Address (Give address to wh P.O. Box 1558 Bre Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES	ich approved copy of the copy	his form is to be sent) xas 76024 his form is to be sent) 8240 G. J.D3
Definition of the regulations of the original complete to the best of the provided with and that the information given is true and complete to the best of the provided with and that the information given is true and complete to the best of the deviation tests taken on the well in accordance 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. February 17, 1988 (Date)	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, give location of tanks. I this production is commingled w NOTE: Complete Parts IV and	SPORTER OF OIL AND NATURA OIL Or Condensate Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E with that from any other lease or pool. K 0 n reverse side if necessary.	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num	ich approved copy of it ckenridge, Tex ich approved copy of it New Mexico 8 When 9-2/86 ober:	his form is to be sent) tas 76024 his form is to be sent) 8240 Part 1D-3 3-26 28 chydr J.T. Milton
Definition of the regulations of the original complete to the best of the provided with and that the information given is true and complete to the best of the provided with and that the information given is true and complete to the best of the deviation tests taken on the well in accordance 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. February 17, 1988 (Date)	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, give location of tanks. I this production is commingled w NOTE: Complete Parts IV and	SPORTER OF OIL AND NATURA OIL Or Condensate Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E with that from any other lease or pool. K 0 n reverse side if necessary.	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num	ich approved copy of it ckenridge, Tex ich approved copy of it New Mexico 8 When 9-2/86 ober:	his form is to be sent) tas 76024 his form is to be sent) 8240 Part 1D-3 3-26 28 chydr J.T. Milton
BY Mike Willidms Mike Willidms Oil & Gas Inspector ITTLE Oil & Gas Inspector Services Supervisor If this is a request for allowable for a newly drilled or deepened deviation (Title) (Title) February 17, 1988 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 filled for each pool in multiply	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces oil or liquids, give location of tanks. It this production is commingled w NOTE: Complete Parts IV and T. CERTIFICATE OF COMPLI	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 18S 31E with that from any other lease or pool, d V on reverse side if necessary. ANCE	L GAS Address (Give address to wh P.O. Box 1558 Bre Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS	ich approved copy of i ckenridge, Tex ich approved copy of i New Mexico 8 When 9-2/86 ober:	his form is to be sent) tas 76024 his form is to be sent) 8240 Part 1D-3 3-26 28 chydr J.T. Milton
Oil & Gas Inspector Introduction Services Supervisor (Title) February 17, 1988 (Date) Oil & Gas Inspector TITLE Oil & Gas Inspector This form is to be filled in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened (Date) TITLE	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, pive location of tanks. This production is commingled w IOTE: Complete Parts IV and I. CERTIFICATE OF COMPLI hereby certify that the rules and regula	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 18S 31E with that from any other lease or pool, d V on reverse side if necessary. ANCE ations of the Oil Conservation Division have	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin	ich approved copy of it ckenridge, Tex ich approved copy of it New Mexico 8 When 9-2/86 ober: SERVATION DIVI B 2 4 1988 Dal Signed By	his form is to be sent) tas 76024 his form is to be sent) 8240 Part 1D-3 3-26 28 chydr J.T. Milton
Image: Supervisor (Title) February 17, 1988 (Date)	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, pive location of tanks. This production is commingled w NOTE: Complete Parts IV and T. CERTIFICATE OF COMPLI hereby certify that the rules and regula cen complied with and that the informa	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 18S 31E with that from any other lease or pool, d V on reverse side if necessary. ANCE ations of the Oil Conservation Division have	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin	ich approved copy of it ckenridge, Tex ich approved copy of it New Mexico 8 When 9-2/86 ober: SERVATION DIVI B 2 4 1988 Dal Signed By	his form is to be sent) tas 76024 his form is to be sent) 8240 Part 1D-3 3-26 28 chydr J.T. Milton
If this is a request for allowable for a newly drilled or deepened Services Supervisor (Title) February 17, 1988 (Date)	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, pive location of tanks. This production is commingled w IOTE: Complete Parts IV and I. CERTIFICATE OF COMPLI thereby certify that the rules and regulation	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 18S 31E with that from any other lease or pool, d V on reverse side if necessary. ANCE ations of the Oil Conservation Division have	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYAil Oil &	ich approved copy of it ckenridge, Tex ich approved copy of it New Mexico 8 When 9-2/86 aber: SERVATION DIVI B 2 4 1988 nal Signed By Williams	his form is to be sent) tas 76024 his form is to be sent) 8240 Part 1D-3 3-26 28 chydr J.T. Milton
Services Supervisor (Title) February 17, 1988 (Date) (Date) (Date)	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, pive location of tanks. This production is commingled w IOTE: Complete Parts IV and I. CERTIFICATE OF COMPLI hereby certify that the rules and regulater complied with and that the information	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 18S 31E with that from any other lease or pool, d V on reverse side if necessary. ANCE ations of the Oil Conservation Division have	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYAil Oil &	ich approved copy of it ckenridge, Tex ich approved copy of it New Mexico 8 When 9-2/86 aber: SERVATION DIVI B 2 4 1988 nal Signed By Williams	his form is to be sent) tas 76024 his form is to be sent) 8240 Part 1D-3 3-26 28 chydr J.T. Milton
Services Supervisor (Title) February 17, 1988 (Date) (Date) - (Date) -	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, give location of tanks. This production is commingled w NOTE: Complete Parts IV and I. CERTIFICATE OF COMPLI hereby certify that the rules and regulate een complied with and that the informaty knowledge and belief.	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 18S 31E with that from any other lease or pool, d V on reverse side if necessary. ANCE ations of the Oil Conservation Division have	L GAS Address (Give address to wh P.O. Box 1558 Bren Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYMil TITLE OIL &	ich approved copy of it ckenridge, Tex ich approved copy of it New Mexico 8 When 9-2/86 aber: SERVATION DIVI B 2 4 1988 nal Signed By we Williams Gas Inspector	his form is to be sent) tas 76024 his form is to be sent) 8240 Part ID-J 3-26 Ed chy D.T. NUM SION , 19
Services Supervisor (Title) (Title) All sections of this form must be filled out completely for allowable on new and recompleted wells. February 17, 1988 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. (Date) Separate Forms C-104 must be filled for each pool in multiply	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, pive location of tanks. This production is commingled w IOTE: Complete Parts IV and I. CERTIFICATE OF COMPLI hereby certify that the rules and regulate een complied with and that the informaty knowledge and belief.	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E with that from any other lease or pool. d V on reverse side if necessary. ANCE ations of the Oil Conservation Division have ation given is true and complete to the best of	L GAS Address (Give address to wh P.O. Box 1558 Bren Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYMil TITLE Oil & This form is to be If this is a request	ich approved copy of it ckenridge, Tex ich approved copy of it New Mexico 8 When 9-2/86 nber: BERVATION DIVI B 2 4 1988 nal Signed By Williams Gas Inspector filed in compliance	his form is to be sent) tas 76024 his form is to be sent) 8240 Part 1D-3 3-26 Ed chy D.T. Milk SIDN , 19 with RULE 1104. Sewly drilled or deepened
(1 (iie) February 17, 1988 (Date) (Dat	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces oil or liquids, give location of tanks. It this production is commingled w NOTE: Complete Parts IV and T. CERTIFICATE OF COMPLI hereby certify that the rules and regula een complied with and that the informa- by knowledge and belief.	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E with that from any other lease or pool. d V on reverse side if necessary. ANCE ations of the Oil Conservation Division have ation given is true and complete to the best of	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYMil TITLE Oil & This form is to be If this is a request well, this form must be	ich approved copy of in ckenridge, Tex ich approved copy of in New Mexico 8 When 9-2/86 ober: ERVATION DIVI B 2 4 1988 nal Signed By Williams Gas Inspector for allowable for a ca accompanied by a ta	his form is to be sent) (as 76024 his form is to be sent) 8240 (2, 1)-3 3-26 26 Classified of depenent with RULE 1104. newly drilled or deepenent bulation of the deviation
(Date) well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquide, pive location of tanks. This production is commingled w NOTE: Complete Parts IV and T. CERTIFICATE OF COMPLI hereby certify that the rules and regulate een complied with and that the informatory knowledge and belief.	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 18S 31E with thet from any other lease or pool, d V on reverse side if necessary. ANCE ations of the Oil Conservation Division have ation given is true and complete to the best of Mature J	L GAS Address (Give address to wh P.O. Box 1558 Bre Address (Give address to wh Box 460 Hobbs, 1s gas actually connected? YES give commingling order nun OIL CONS APPROVED FE Origin BYMil TITLE Oil & TITLE Is a request well, this form must be tests taken on the well	ich approved copy of in ckenridge, Tex ich approved copy of in New Mexico 8 When 1 9-2/86 aber: SERVATION DIVI B 2 4 1988 hal Signed By te Williams Gas Inspector for allowable for a re accompanied by a te In accordance with	his form is to be sent) (as 76024 his form is to be sent) 8240 6.7 10-3 2-26 26 Chyl:T.NHC SIDN
Separate Forms C-104 must be filed for each pool in multiply	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquide, pive location of tanks. This production is commingled w HOTE: Complete Parts IV and I. CERTIFICATE OF COMPLI hereby certify that the rules and regulation een complied with and that the information by knowledge and belief.	SPORTER OF OIL AND NATURA DII Or Condensate X Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 18S 31E with thet from any other lease or pool, d V on reverse side if necessary. ANCE ations of the Oil Conservation Division have ation given is true and complete to the best of Mature J	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYMil TITLE Oil & This form is to be If this is a request well, this form must be tests taken on the well All sections of this able on new and recomp	ich approved copy of the ckenridge, Tex ich approved copy of the New Mexico 8 1 9-2/86 aber:	his form is to be sent) (as 76024 his form is to be sent) 8240 (2, 7 1)-3 3-26 26
	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, give location of tanks. It this production is commingled v NOTE: Complete Parts IV and T. CERTIFICATE OF COMPLI hereby certify that the rules and regula cen complied with and that the informa- by knowledge and belief. Services Supervisor February 17, 1988	SPORTER OF OIL AND NATURA or Condensate Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E with that from any other lease or pool. V on reverse side if necessary. ANCE ations of the Oil Conservation Division have ation given is true and complete to the best of Maximum J	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYMil TITLE Oil & TiTLE Oil & If this is a request well, this form must be tests taken on the well All sections of this able on new and recomp Fill out only Sector	ich approved copy of the ckenridge, Tex ich approved copy of the New Mexico 8 (When 9-2/86 abber:	his form is to be sent) (as 76024 his form is to be sent) 8240 For TD-3 D-26 26 Chapter J.T. NHC SION , 19 with RULE 1104. newly drilled or deepensc ibulation of the deviation RULE 111. out completely for allow- 7 for changes of owner.
	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, give location of tanks. It this production is commingled v NOTE: Complete Parts IV and T. CERTIFICATE OF COMPLI hereby certify that the rules and regula cen complied with and that the informa- by knowledge and belief. Services Supervisor February 17, 1988	SPORTER OF OIL AND NATURA or Condensate Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E with that from any other lease or pool. V on reverse side if necessary. ANCE ations of the Oil Conservation Division have ation given is true and complete to the best of Maximum J	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYMil TITLE Oil & TITLE Is a request well, this form must be tests taken on the well All sections of this able on new and recomp Fill out only Section well name or number, or the section of	ich approved copy of in ckenridge, Tex ich approved copy of in New Mexico 8 When 9-2/86 aber: DERVATION DIVI B 2 4 1988 al Signed By Williams Gas Inspector for allowable for a r accompanied by a tail in accordance with form must be filled leted wells. ons I, II, III, and V ransporter, or other a	his form is to be sent) (as 76024 his form is to be sent) 8240 (2, 1)-3 3-26 26 (1, 1)-3 SIDN
	II. DESIGNATION OF TRAN Name of Authorized Transporter of C KOCH Oil Co. Div of Name of Authorized Transporter of C Conoco Inc. If well produces off or liquids, pive location of tanks. This production is commingled v IOTE: Complete Parts IV and I. CERTIFICATE OF COMPLI hereby certify that the rules and regulate the complied with and that the information y knowledge and belief. Services Supervisor February 17, 1988	SPORTER OF OIL AND NATURA or Condensate Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E with that from any other lease or pool. V on reverse side if necessary. ANCE ations of the Oil Conservation Division have ation given is true and complete to the best of Maximum J	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYMil TITLE Oil & TITLE Oil & This form is to be If this is a request well, this form must be tests taken on the well All sections of this able on new and recomp Fill out only Section well name or number, or to Separate Forms C-1	ich approved copy of in ckenridge, Tex ich approved copy of in New Mexico 8 When 9-2/86 aber: DERVATION DIVI B 2 4 1988 al Signed By Williams Gas Inspector for allowable for a r accompanied by a tail in accordance with form must be filled leted wells. ons I, II, III, and V ransporter, or other a	his form is to be sent) (as 76024 his form is to be sent) 8240 (2, 1)-3 3-26 26 (1, 1)-3 SIDN
	L. DESIGNATION OF TRAN Tame of Authorized Transporter of C KOCH 0il Co. Div of Tame of Authorized Transporter of C CONOCO Inc. T well produces oil or liquids, two location of tanks. This production is commingled w OTE: Complete Parts IV and L. CERTIFICATE OF COMPLI hereby certify that the rules and regular en complied with and that the informaty knowledge and belief. Services Supervisor Tebruary 17, 1988	SPORTER OF OIL AND NATURA or Condensate Koch Ind. Inc. Casinghead Gas or Dry Gas Unit Sec. Twp. Rge. K 4 185 31E with that from any other lease or pool. V on reverse side if necessary. ANCE ations of the Oil Conservation Division have ation given is true and complete to the best of Maximum J	L GAS Address (Give address to wh P.O. Box 1558 Bre- Address (Give address to wh Box 460 Hobbs, Is gas actually connected? YES give commingling order num OIL CONS APPROVED FE Origin BYMil TITLE Oil & TITLE Oil & This form is to be If this is a request well, this form must be tests taken on the well All sections of this able on new and recomp Fill out only Section well name or number, or to Separate Forms C-1	ich approved copy of in ckenridge, Tex ich approved copy of in New Mexico 8 When 9-2/86 aber: DERVATION DIVI B 2 4 1988 al Signed By Williams Gas Inspector for allowable for a r accompanied by a tail in accordance with form must be filled leted wells. ons I, II, III, and V ransporter, or other a	his form is to be sent) (as 76024 his form is to be sent) 8240 (2, 1)-3 3-26 26 (1, 1)-3 SIDN

- ·

.