ENERGY AND MINERALS DEPARTMENT	vī .							
DISTRIBUTION SANTA FE	OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501							
V.S.G.S.								
TRANSPORTER GAS V	REQUEST FOR ALLOWABLE AND							
PRORATION OFFICE	AUTHORIZATION TO TRANSP	-						
Operator								
DEKALB Energy Comp	any v							
800 Central, Odess Reason(s) for filing (Check proper box	a, Texas 79761	Other (Please ex						
New Well	Change in Transporter of:							
Recompletion	OII Dry	Corporate						
Change in Ownership	Casinghead Gas Cor	nden a a te						
If change of ownership give name and address of previous owner	JD LEASE							
Lease Name	Well No. Pool Name, Including to							
East Millman Unit	148 Millman Queen	Grayburg East						
Unit LetterA :	660 Feet From The North Line	and 660						
Line of Section 14 To	awnship 19 Range	28 , NMPM,						
III. DESIGNATION OF TRANS	SPORTER OF OIL AND NATURAL	GAS Addiosa (Give address to						
		P.O. Box 175, Ar						
Navajo Refining Compa	seinghead Gas V of Dry Gas	Address (Cive address to						
Phillips Petroleum Co	4001 Penbrook, O							
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected						
give location of tanks.	P 15 19 28	Yes						
If this production is commingled w	with that from any other lease or pool,	give commingling order n						
NOTE: Complete Parts IV and	V on reverse side if necessary.	14						
VI. CERTIFICATE OF COMPLI	ANCE	OIL CO						
I hereby certify that the rules and regula	ations of the Oil Conservation Division have	APPROVED MA						
been complied with and that the information my knowledge and belief.	ttion given is true and complete to the best of	BY Orig						
,		TITLE						
α		This form is to b						
& Denn	If this is a reque							
(Signal and Signal and	/fature/	well, this form must be tests taken on the we						
Chief Production	Clerk	All sections of the able on new and reco						
•	•	Bota ou nam sur tace						

(Date)

Form C-104 Revised 10-01-78 Format 06-01-63 Page 1

RECEIVED

SEP 08 '88

PROMATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS								
I								O. C. D. ITESIA, OFFICE	
Operator							A15	(IESIA, OITAL	
DEKALB Energy Company	_/								
Address									
800 Central, Odessa,	Texas 79	9761				· · · · · · · · · · · · · · · · · · ·			
Reason(s) for liling (Check proper box)					Other (Please	e explain)			
New Aell	Change in T	Fransporter of			Cornor	ate Name (hance.		
Recompletion	Corporate Name Change								
Change in Ownership	Casingl	head Gas	c。	ndensate					
If change of ownership give name and address of previous owner		. Inc.	800 Ç	entral,	Odessa,	Texas 79	761		
II. DESCRIPTION OF WELL AND	LEASE	ool Name, in	cluding Ec	umation	Α	Kind of Leas	•		Lease No
Legae Name	1 17				of a	State, Federa	5	ł	
East Millman Unit	148 1	<u>Millman</u>	Queen	Graybur	g East	12.000	Si	tatel	<u>648</u>
Unit Letter A : 660	Feel From	The Nor	<u>th</u> Line		660	Feet From		East	
Line of Section 14 Towns	hip 19	R	ange	28	, NMPA	4. Ede	<u>ly</u>		County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Or Condensate Addiess (Give address to which approved copy of this form is					this form is to	be sent)			
Navajo Refining Company			P.O. Box 175, Artesia, New Mexico 88210						
Name of Authorized Transporter of Casine	ghead Gas 😨	or Dry Go	• 🗆	Address (Give address	to which appro	ved copy of	this form is to	be sent/
Phillips Petroleum Comp.				4001 1	enbrook,	, Odessa,	Texas	79760	
	Jnit Sec.	Twp.	Rge.	is gas ac	lually connec	ted? W	en		
If well produces oil or liquids, give location of tanks.	P ! 15	19	28	Ye	s	1	Septer	nber 1960	
If this production is commingled with		other lease	or pool,	give comm	ningling orde	er number:	CTB 10	19 POST	こするこう
								9-1	10-89
NOTE: Complete Parts IV and V	on reverse sid	de if necess	ary.					afr.	a Rh
VI. CERTIFICATE OF COMPLIAN	CE				OIL C	CONSERVA	TION DIV	VISION (η cη- ·
		·		MAR 7	1989				
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, II							
		BY Original Signed By							
			TITLE						
016				T	nis form is t			• with RULE	
Lenney	R.	L. Denne	У	11	this is a rec	quest for allo	wable for a	newly drilled tabulation of	d or deeper
(Sig/Satu	10)			Il well, t		at be accomp			444146

All sections of this form must be filled out completely for all cable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of own well name or number, or transporter, or other such change of conditi

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