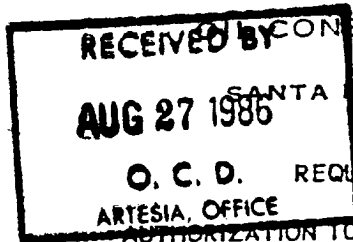


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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SANTA FE	<input checked="" type="checkbox"/>
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TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input type="checkbox"/>



CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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

I. Operator Bliss Energy Corporation

Address P. O. Box 1817, Hobbs, N.M. 88241

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain) Operator's Name Change

If change of ownership give name and address of previous owner Bliss Petroleum, Inc., P. O. Box 1817, Hobbs, N.M. 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Warren State</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Millman Grayburg</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>E-1051</u>
Location				
Unit Letter <u>D</u>	<u>990</u>	Feet From The <u>North</u> Line and <u>330</u>	Feet From The <u>West</u>	
Line of Section <u>17</u>	Township <u>19S</u>	Range <u>28E</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"/> <u>Navajo Crude Oil Purchasing Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Drawer 175, Artesia, N.M. 88210</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips Petroleum Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>Bartlesville, Oklahoma 74004</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? <u>Yes</u> When <u>9/11/78</u>
Unit <u>D</u> Sec. <u>17</u> Twp. <u>19S</u> Rge. <u>28E</u>	<u>Post 10-3</u> <u>9-5-86</u> <u>chg of name</u>

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.

Paul Bliss
(Signature)
President

June 4, 1986

(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 5 1986, 19 _____

BY Original Signed By
Les A. Clements

TITLE Supervisor District II

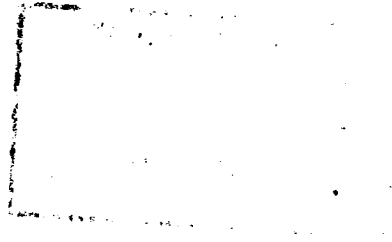
This form is to be filed in compliance with RULE 1104.

If this is a request for Allowable for a newly drilled or reopened 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 all wells 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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O.C.D.
HOBBS OFFICE