omu 5 Copies propriate District Office		State of Nev Is and Natur	w Mexico ral Resources De,	mentiaN	1 2 1994	Form C-1 Revised 1	
STRICT D. Box 1980, Hobbs, NM 88240			TION DIVIS	• • • •	1 & 1334	See Instru at Bottom	
<u>STRICT II</u> D. Drawer DD, Anesia, NM 88210		P.O. Bo				05	F
STRICT III OU Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR A			ORIZATIO	N	C	X
	TO TRANSP	ORT OIL	AND NATURA		ell API No.	<u>.</u>	
Southwest Royalti	es, Inc.				30-015-0	4617	
c/o Box 953, Mid	land. TX 79702						
eason(s) for Filing (Check proper bax) lew Well	Change in Transp Oil I Dry G		Other (Pleas			NIN	
change is Operator	Casinghead Gas 🗌 Conde		Effective	Date 12-	1-93	`	
ad address of previous operator							· · · · · · · · · ·
I. DESCRIPTION OF WELL		Name, Includio	e Formalice	ĸ	ind of Leave	Lea	se No.
orth Hackberry Yates		-	kberry Yates	Se	iale, Federal or Fee		
.ocsilion Unit Letter J		rom The <u>80</u>	uth Line and	1980	_ Feet From The _	east	Line
Section 23 Toward	hip 195 Range	30E	, NMPM.	Eddy			County
			<u></u>	<u> </u>			county
II. DESIGNATION OF TRA Name of Authorized Transporter of Ou	NSPORTER OF OIL AN	ND NATUR	Address (Give addres	t to which appr	and copy of this fu	em is to be sen	
NONE INJECTION W							·/
Name of Authorized Transporter of Casi	inghead Gas 🛄 or Dr	y Gas 🗖	Address (Give addres	s to which appr	oved copy of this fo	rm is to be sen	1)
I well produces oil or liquids,	Unit Sec. Twp.	Rgs.	is gas actually connec	ted? W	vhea ?		
ive location of tanks.		1		i			
ive location of tanks. I this production is commingled with th	If from any other lease or pool, g	pive commingli	ag order sumber:	i			
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f this production is commingled with the	Oil Well	give commingli Gas Well	ing order sumber:	over Deep	en Plug Back	Same Res'v	Dif Res'v
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

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1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

2) All sections of this form must be filled out for allowable on new and recompleted wells.

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.