STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTM	ENT				Form C-104
		,		RECEIVED	Revised 10-01-78 Format 06-01-83
DISTRIBUTION	OIL CONSERVATION DIVISION			N	Page 1
SANTA PE	P. O. BOX 2088 SANTA FE, NEW MEXICO 87501		MAY - 7 199	• •	
PILE			mai - 1 133		
U.B.G.A.				O. C. D.	
TRANSPORTER OIL OIL OAS OPERATOR	REQUEST FOR ALLOWABLE		ARTESIA, OFFICI	ARTESIA, OFFICE	
PROMATION OFFICE	AUTHORIZ		SPORT OIL AND NATUR	AL GAS	• •
<u>I.</u>					·····
FI-RO CORPORATIO	ON /				
Address			<u>_</u>		
P O BOX 8148	ROSWELL, N	.M. 88202			
Reason(s) for filing (Check proper b	01)		Other (Please)	explain)	· · ·
New Well	Change in Ti	ansporter of:			
Recompletion			Dry Gas		
Change in Ownership	Casingh	eod Gas	Condensate		
I. DESCRIPTION OF WELL A	ND LEASE	ol Name, Including	Formation	Kind of Lease	Lease No
Leose Name TODEWATER STATE	2 N	<b>HACKBERRY</b>	YATES 7 RIVERS	State, Federal or Fee	TATE L4472
Loceilen					
Unit Letter;;	1650 Feel From 7	he SOUTH	ine and1650	Feet From TheEAST	
Line of Section 36 T	ownship 195	Range 3	0E <b>, м</b> мрм,	EDDY	County
III. DESIGNATION OF TRAN	SPORTER OF OI	AND NATURA	LGAS		
Nome of Authorized Transporter of C	Dil XXi er Cond	ensate	Add: ess (Give address to	which approved copy of i	nis jorm is to be senty
NAVAJO REFINING CORPORATION			ARTESIA, N.M.		
Name of Authorized Transporter of C	Casinghead Gas	or Dry Gas	Address (Give address to	which approved copy of I	his form is to be sentj
If well produces oil or liquids, give location of tanks.	Unit Sec. J 36	Twp. Rge. 195 30E	is gas actually connected	ا 	
if this production is commingled t			, give commingling order (	number:	
NOTE: Complete Parts IV and	v on reverse side	ij necessary.	11		
VI. CERTIFICATE OF COMPLIANCE				MAY 1 0 1991	ISION

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.

FI-RO CORPORATION

(Signature) TWANA McDONALD, SECRETARY (Tule) 5-4-91

(Date)

APPROVED_	MAY 1 0 1991	
BY	ORIGINAL SIGNED BY	
TITLE	MIKE WILLIAMS SUPERVISOR, DISTRICT	

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.