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ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER OIL		
TRANSPORTER GAS		
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Form C-104
Revised 10-01-78
Format 06-01-83
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OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: Plemons-Angel Oil Co. ✓

Address: 4 Sagebrush Trail, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)

- [ ] New Well
- [ ] Recompletion
- [X] Change in Ownership

Change in Transporter of:

- [ ] Oil
- [ ] Dry Gas
- [ ] Casinghead Gas
- [ ] Condensate

Other (Please explain)

If change of ownership give name and address of previous owner: Hughes Production Company 2403 Cerro Rd. Artesia, N.M. 88210

LC-059569B

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
North Shugart Queen Unit	1	Shugart Y-Sr-Qu-Gb	State, Federal or Fee Federal	Above

Location

Unit Letter C, 1650 Feet From The West Line and 990 Feet From The North

Line of Section 21 Township 18s Range 31e, NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [ ] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
Injection	
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
	Post ID-3
If well produces oil or liquids, give location of tanks. Unit / Sec. / Twp. / Rge.	Is gas actually connected? / When: 5-8-87 chg op

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.

Joe A. Angel
(Signature)
Partner
(Title)
5/3/87
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 5 1987, 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 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.