

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED

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

DEC 09 '87

O. C. D.
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SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

I. Operator W & W OIL, INCORPORATED

Address P.O. Box 427 Lovington, NM 88260

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 checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lessee Name <u>Featherstone Federal</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Shugart Yates-SR-Queen-Gburg</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>069033</u>
Location				
Unit Letter <u>L</u>	<u>990</u> Feet From The <u>West</u> Line and <u>1650</u> Feet From The <u>South</u>			
Line of Section <u>5</u>	Township <u>19S</u>	Range <u>31E</u>	NMPM, <u>Eddy</u> County	

SCURLOCK PERMIAN CORP EFF 9-1-91

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Permian Corp. d.b.a. Western Oil Transporters</u>	<u>P.O. Box 1183 Houston, TX 77251-1183</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
	<u>Post ID-3</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>L</u> Sec. <u>5</u> Twp. <u>19S</u> Rge. <u>31E</u>	<u>12-11-87</u> <u>chgt JHM</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.

Art Wichusich

(Signature)

President

(Title)

December 7, 1987

(Date)

OIL CONSERVATION DIVISION

DEC 11 1987

APPROVED _____, 19

BY Original Signed By
Mike Williams

TITLE Oil & Gas Inspector

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 deviated 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 multiple completed wells.