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ENERGY AND MINERALS DEPARTMENT

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## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator

RAY WESTALL

Address

P.O. Box 4, Loco Hills NM 88255

Reason(s) for filing (Check proper box)

☐ New Well☐ Recompletion☒ Change in Ownership

Change in Transporter of:

☐ Oil☐ Casinghead Gas☐ Dry Gas☐ Condensate

Other (Please explain)

If change of ownership give name  
and address of previous owner

TEXAS CRUDE OIL COMPANY

2100 TEXAS CRUDE Bldg  
HOUSTON, TX 77002

## II. DESCRIPTION OF WELL AND LEASE

Lease Name TENNESSEE FEDERAL	Well No. 1	Pool Name, including Formation INJECTION WELL R-8173	Kind of Lease State, Federal or Fee FED. LC	Lease No. 063622
Location				
Unit Letter I	1980	Feet From The SOUTH	Line and 660	Feet From The EAST
Line of Section 21	Township 19S	Range 31E	NMPM, EDDY	County

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.
Is gas actually connected?	when

Post ID-2  
4-18-86  
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.

Ray Westall  
(Signature)  
Owner - operator  
(Title)  
4/10/86  
(Date)

## OIL CONSERVATION DIVISION

APR 11 1986

APPROVED \_\_\_\_\_, 19

BY \_\_\_\_\_  
Original Signed By  
Les A. ClementsTITLE \_\_\_\_\_  
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 allow able 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.

