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Form C-104  
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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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PRODUCTION OFFICE	

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

O. C. D.  
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
General Producing Company

Address  
Post Office Box 14837, Oklahoma City, Oklahoma 73113

Reason(s) for filing (Check proper box):

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Other (Please explain):
<input type="checkbox"/> Recombination	<input type="checkbox"/> Oil	Name change, same company,
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Condensate Gas	same address.
	<input type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner: Entex Petroleum, Inc., POBox 14837, OKC., OK 73113

II. DESCRIPTION OF WELL AND LEASE

Lease Name Parkway West Unit	Well No. 1	Pool Name, including Formation West Parkway Atoka	Kind of Lease State, Federal or Fee	Lease No. K-3153
Location Unit Letter <u>C</u> : <u>660</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u>				
Line of Section <u>28</u> Township <u>19S</u> Range <u>29E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Koch Oil Company of Texas, Inc.	POBox 1558 Breckenridge, Texas 76024
Name of Authorized Transporter of Condensate Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
No gas sales	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	C 28 19S 29E No Feb. 11, 1983 disconnected.

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.

Berry M. Johnson  
(Signature)  
Berry M. Johnson, Production Manager  
(Title)  
October 22, 1987  
(Date)

OIL CONSERVATION DIVISION  
JAN 29 1988  
APPROVED \_\_\_\_\_  
BY \_\_\_\_\_ Original Signed By  
Mike Williams  
TITLE \_\_\_\_\_ Oil & Gas Inspector

This form is to be filed in compliance with N.M.S. 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 N.M.S. 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.