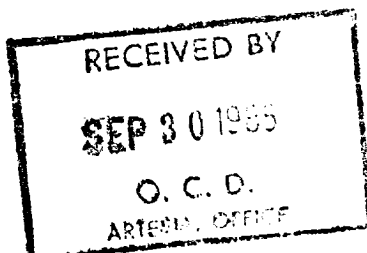


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| LAND OFFICE | |
| TRANSPORTER | <input checked="" type="checkbox"/> |
| OIL | <input checked="" type="checkbox"/> |
| GAS | <input checked="" type="checkbox"/> |
| OPERATOR | <input checked="" type="checkbox"/> |
| PRODUCTION OFFICE | <input type="checkbox"/> |



OIL CONSERVATION DIVISION

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

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Entex Petroleum, Inc.

Address
P.O. Box 14857, Oklahoma City, Oklahoma 73115

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

Other (Please explain)

If change of ownership give name and address of previous owner William Moss Properties, 3505 Lee Parkway, Dallas, Texas 75219

II. DESCRIPTION OF WELL AND LEASE

| | | | | | |
|--|----------------|---|--|----------------|-----------------------|
| Lease Name Parkway West Unit | Well No. #3 | Pool Name, including Formation Parkway West Atoka-Morrow | Kind of Lease State, Federal or Fee | State State | Lease No. K-4530-1 |
| Location Unit Letter <u>K</u> ; <u>1,980</u> Feet From The <u>West</u> Line and <u>1,980</u> Feet From The <u>South</u> Line of Section <u>29</u> Township <u>19 South</u> Range <u>29 East</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"/> KOCH Oil Company | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1484, Breckenridge, Texas 76024 |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso, Inc. | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1520, Hobbs, New Mexico 88240 |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Company | Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, Texas 79909 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rgs. K 29 29 S 29 E |
| Is gas actually connected? | When February 24, 1976 June 24, 1975 |

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.

Claude V. McNully
Claude V. McNully (Signature)
Division Manager

(Title)

September 26, 1985

(Date)

OIL CONSERVATION DIVISION

SEP 30 1985

APPROVED _____, 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.

last FD-3
10-4-85
Chg OP