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STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENTForm C-104  
Revised 10-01-78  
Format 05-01-83  
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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

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		✓
FILE		✓
U.S.G.A.		
LAND OFFICE		
TRANSPORTER	OIL	✓
	GAS	✓
OPERATOR		✓
PERMITS OFFICE		

I.

Operator

Entex Petroleum, Inc. ✓

Address

P.O. Box 14837, Oklahoma City, Oklahoma 73113

Reason(s) for filing (Check proper box)

- ☐ New Well  
☐ Recompletion  
☒ 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 William Moss Properties, Inc. 3303 Lee Parkway Dallas Texas 75219

## II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Parkway West Unit</u>	Well No. <u>9</u>	Pool Name, including Formation <u>West Parkway Atoka</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>K-6949-</u>
Location Unit Letter <u>G</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>21</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)
<u>Koch Oil Company</u>	<u>P.O. Box 1484 Breckenridge, Texas 76024</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>El Paso Natural Gas Company</u>	<u>P.O. Box 1492 El Paso, Texas 79999</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	<u>G</u> <u>21</u> <u>19S</u> <u>29E</u> <u>Yes</u> <u>April 7, 1982</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.

Past ID-3  
10-4-85  
CNG OP

## 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.



(Signature)

Claude V. McNully, Division Manager

(Title)

September 27, 1985

(Date)

## OIL CONSERVATION DIVISION

APPROVED SEP 30 1985, 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 multiple completed wells.