STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

ENCHUT AND MINEHALS DEPARTMENT	
	TION DIVISION RECEIVED Form C-104 Revised 10-01-78 Format 06-01-83 Page 1
P. O. BO U.S.G.S. SANTA FE, NEW	•••
OPENATOR REQUEST FOR	
	PORT OIL AND NATURAL GAS
Operator Metex Pipe & Supply	
Address P. O. Box 1037, Artesia, NM 88210	
Reason(s) for filing (Check proper box) Other (Please explain)	
New Vell Change in Transporter of:	
	y Gas EFFECTIVE Undensate 9-1-88
If change of ownership give name Marnel Pipe & Supply, P.O.Box 1037, Artesia, NM 88210	
II. DESCRIPTION OF WELL AND LEASE	· · · · · · · · · · · · · · · · · · ·
Lease Name Well No. Pool Name, Including Fi	Lease No.
RUTH 1 East Millman- (	Qn, GB, SA State
Unit LetterB ; 330 Feet From The North Line and 2340 Feet From The East	
Line of Section 24 Township 195 Range 28E , NMPM, Eddy County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL Name of Authorized Transporter of Oil Condensate	, GAS Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Co. Name of Authorized Transporter of Casinghead Gas ( ) or Dry Gas	
	P.O.Drawer 159, Artesia, NM 88210 Address (Give address to which approved copy of this form is to be sent)
Phillips 66 Natural Gas	P.O.Box 5050, Bartlesville, OK 74005
give location of tanks.	Yes 03/84 POST I)-3
NOTE: Complete Parts IV and V on reverse side if necessary.	give commingling order number: <u>1-1-3-89</u> Olig ap
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED
been complied with and that the information given is true and complete to the best of my knowledge and belief.	BY
	TITLE
ntie D. II	
Milma Privetta	This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or despended
(Sienaiwe) Bookkeeper	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.
(Title)	All cections of this form must be filled out completely for allow- able on new and recompleted wells.
8/30/88 (Date)	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 Forma C-104 must be filed for each pool in multiply completed wells.

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