

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

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

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JAN 07 '88

O. C. D.  
ARTESIAN OFFICE

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Larry's Drilling & Pump Co. ✓

Address 2116 W. Bender, Hobbs, NM 88240

Reason(s) for filing (Check proper box)		Other (Please explain)	
<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas	Change of Owner/ Operator
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	

If change of ownership give name Bel-Dyn, Inc. Properties, P.O.Box 136, Lovington, NM 88260  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Male Federal</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Shugart Y 7R Queen - G</u>	Kind of Lease State, Federal or Fee <u>Fed.NM</u>	Lease No. <u>o5o353</u>
Location Unit Letter <u>F</u> : <u>2180</u> Feet From The <u>N</u> Line and <u>2080</u> Feet From The <u>West</u>				
Line of Section <u>1</u> Township <u>19S</u> Range <u>30E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

79762

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Conoco, Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <u>4708 Andrews Hiway, Odessa, Texas 79762</u>	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips</u>	Address (Give address to which approved copy of this form is to be sent) <u>Phillips Bldg., Odessa, Texas 79762</u> <u>Post FD-3</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>K</u> Sec. <u>1</u> Twp. <u>19S</u> Rge. <u>30E</u>	Is gas actually connected? <u>Yes</u> When <u>1-15-83</u> <u>1-15-88</u> <u>chy op</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.

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.

Operator 1-4-88(Title)  
(Date)

OIL CONSERVATION DIVISION

JAN 12 1988

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_  
BY Original Signed By  
Mike Williams  
TITLE Oil & Gas Inspector

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.