STATE OF NEW MEXICO							
ENERGY AND MINERALS DEPARTMENT							
00. 07 60P118 006C1VE0					_	Form C-104 Revised 10-01-7	8 .
DISTRIBUTION		IL CO	NSERVA	TION DIVISIO	N RECEIVED	Format 06-01-83	3
FILE FILE			Р. О. ВО	X 2088			•
U.S.G.S.		SANTA	FE, NEW	MEXICO 87501	ADD a		
LAND OFFICE					APR 08 '8	8	
TRANSPORTER GAS		DE	CHIECT COC	R ALLOWABLE			
UPERATOR		K L		ND	୍ . ୍ ଦ୍ରାଘ. ଅ .		
PRONATION OFFICE	AUTHO	RIZATION		PORT OIL AND NATUR	RAL GAS ARRESM, DEFIN	CÆ	
I.							
WAYNE HEAD						_	
P.O. BOX 468, ARTE	SIA, NEW	MEXICO	88211-	-0468			
Reason(s) for filing (Check proper box)				Other (Please	explain)		····i
New Well	Change i	n Transport	er of:				
Recompletion	OII		Dr	y Gas			
X Change in Ownership	Co∎	Inghead Gas		ndensate CHANGE O	F OPERATOR		
If change of ownership give name EX		ORATION	, P.O. BO	X 1600, MIDLAND	, TEXAS 79702	····	
II. DESCRIPTION OF WELL AND LEASE [Lease Name Well No.] Pool Name, Including Fo				ormation	Kind of Lease	r	Lease No.
LAKEWOOD FEDERAL 1 SEVEN RIVERS YE			250	State, Federal or Fee DE	EDERAL.	NW 31200	
Location		100.00	INT VERNO, 11			<u> </u>	140 11 2.1 41 .
Unit Letter 0 : 660	Feet Fr	om Th e <u>S</u>O	uthtin	• and <u>1993</u>	Feet From The Fast		
Line of Section 34 Town	ahip 19Sou	th	Range 25	Fast , NMPM,	Eddy		County
III. DESIGNATION OF TRANSPO	ORTER OF	OIL AND	NATURAL	GAS			
Name of Authorized Transporter of Oil	X or (Condensate		GAS Addioss (Give address t	o which approved copy of	this form is to	be senij
Name of Authorized Transporter of OII THE PERMIAN CORP. SCI	JRLOCK PERI	Condensate MIAN CORP		Address (Give address :	o which approved copy of OUSTON. TEXAS o which approved copy of	77001	
Name of Authorized Transporter of Oil	JRLOCK PERI	Condensate MIAN CORP	EFF 9-1-91	P.O. BOX 1183. H Address (Give address s	OUSTON, TEXAS	77001	
THE PERMIAN CORP. SCI	JRLOCK PERI	MAN CORP	EFF 9-1-91	Address (Give address :	OUSTON, TEXAS o which approved copy of	77001	
Name of Authorized Transporter of Oil THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids,	X or (JRLOCK PERI nghead Gas (MIAN CORP or Dry	EFF 9-1-91	P.O. BOX 1183. H Address (Give address t	OUSTON, TEXAS o which approved copy of	77001	
Name of Authorized Transporter of Oil THE PERMIAN CORP. SCI Name of Authorized Transporter of Casi If well produces oil or liquids, give location of tanks.	or C JRLOCK PERM Inghead Gas [Unit Second Seco	MIAN CORP or Dry Twp	EFF 9-1-91 Gas [] Rge. 25	P.O. BOX 1183. H Address (Give address t FIARE Is gas actually connects	OUSTON, TEXAS o which approved copy of	77001	
Name of Authorized Transporter of Oil THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids,	or C JRLOCK PERM Inghead Gas [Unit Se O 34 I that from a	MIAN CORP or Dry Twp. 19	EFF 9-1-91 Gas [] . Rge.	P.O. BOX 1183. H Address (Give address t FIARE Is gas actually connects	OUSTON, TEXAS o which approved copy of	77001	
Name of Authorized Transporter of Oil THE PERMIAN CORP. SCI Name of Authorized Transporter of Casi If well produces oil or liquids, give location of tanks. If this production is commingled with	JRLOCK PERMonghead Gas Unit Second Gas Unit Second Gas Unit Second Gas Unit Second Gas	MIAN CORP or Dry Twp. 19	EFF 9-1-91 Gas [] . Rge.	Address (Give address to P.O. BOX 1183. H Address (Give address to FIARE Is gas actually connected give commingling order	OUSTON, TEXAS o which approved copy of	77001 this form is to Rest 4-15	
Name of Authorized Transporter of Oil THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and V VI. CERTIFICATE OF COMPLIAN I hereby certify that the rules and regulation	or C JRLOCK PERI Inghead Gas Unit Second that from a on reverse VCE Insofthe Oil C	or Dry Twp 19 ny other lesside if near	EFF 9-1-91 Gas [] Rge. 125 Esse or pool, Cessary. Division have	Address (Give address to P.O. BOX 1183. H Address (Give address to FIARE Is gas actually connected give commingling order	OUSTON, TEXAS o which approved copy of When I number:	77001 this form is to Rest 4-15	
THE PERMIAN CORP. SCI. Name of Authorized Transporter of Cast. If well produces oil or liquids, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and V. VI. CERTIFICATE OF COMPLIAN	or C JRLOCK PERI Inghead Gas Unit Second that from a on reverse VCE Insofthe Oil C	or Dry Twp 19 ny other lesside if near	EFF 9-1-91 Gas [] Rge. 125 Esse or pool, Cessary. Division have	Address (Give address to P.O. BOX 1183. H. Address (Give address to FIARE. Is gas actually connected give commingling order OIL Co.	OUSTON, TEXAS o which approved copy of when number: ONSERVATION DIV	77001 1his form is to Ret 4-15 Ltg VISION	
THE PERMIAN CORP. SCI Name of Authorized Transporter of Cil THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and V VI. CERTIFICATE OF COMPLIAN I hereby certify that the rules and regulatio been complied with and that the information	or C JRLOCK PERI Inghead Gas Unit Second that from a on reverse VCE Insofthe Oil C	or Dry Twp 19 ny other lesside if near	EFF 9-1-91 Gas [] Rge. 125 Esse or pool, Cessary. Division have	Address (Give address to P.O. BOX 1183. H. Address (Give address to FIARE. Is gas actually connected give commingling order OIL C. APPROVED.	OUSTON, TEXAS o which approved copy of number: ONSERVATION DIV APR 1 8 198 Original Signed Mike William	77001 1/1001 1/1001 1/100	
THE PERMIAN CORP. SCI Name of Authorized Transporter of Cil THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and V VI. CERTIFICATE OF COMPLIAN I hereby certify that the rules and regulatio been complied with and that the information	or C JRLOCK PERI Inghead Gas Unit Second that from a on reverse VCE Insofthe Oil C	or Dry Twp 19 ny other lesside if near	EFF 9-1-91 Gas [] Rge. 125 Esse or pool, Cessary. Division have	Address (Give address to P.O. BOX 1183. H. Address (Give address to FIARE. Is gas actually connected give commingling order OIL CO. APPROVED.	OUSTON, TEXAS o which approved copy of number: ONSERVATION DIV APR 1 8 198 Original Signed Mike William	77001 1/1001 1/1001 1/100	
THE PERMIAN CORP. SCI Name of Authorized Transporter of Cil THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and V VI. CERTIFICATE OF COMPLIAN I hereby certify that the rules and regulatio been complied with and that the information	or C JRLOCK PERI Inghead Gas Unit Second that from a on reverse VCE Insofthe Oil C	or Dry Twp 19 ny other lesside if near	EFF 9-1-91 Gas [] Rge. 125 Esse or pool, Cessary. Division have	Address (Give address to P.O. BOX 1183. H. Address (Give address to FIARE 1s gas actually connected give commingling order OIL CI. APPROVED	OUSTON, TEXAS o which approved copy of number: ONSERVATION DIV APR 1 8 198 Original Signed	77001 shis form is to Pat 4-15 Ling VISION By s ctor	be sent) TD-3 -88 Ip.
Name of Authorized Transporter of OII THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and V VI. CERTIFICATE OF COMPLIAN I hereby certify that the rules and regulation been complied with and that the information my knowledge and belief.	or (JRLOCK PERI Inghead Gas [Unit Se O 34 In that from a Ton reverse NCE Ins of the Oil (In given is true:	or Dry Twp 19 ny other lesside if near	EFF 9-1-91 Gas [] Rge. 125 Esse or pool, Cessary. Division have	Address (Give address to P.O. BOX 1183. H. Address (Give address to FIARE Is gas actually connected give commingling order OIL CI. APPROVED TITLE This form is to If this is a requirement.	OUSTON, TEXAS o which approved copy of when when number: ONSERVATION DIV APR 1 8 198 Original Signed Mike William Oil & Gas Inspect be filed in compliance inst for allowable for a	77001 This form is to Pat 4-15 Ling VISION By S Coor with RULE nowly drilled	be sent) TD-3 -88 Ip. 1104. I or deepened
Name of Authorized Transporter of OII THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and V VI. CERTIFICATE OF COMPLIAN I hereby certify that the rules and regulatio been complied with and that the information	or (JRLOCK PERI Inghead Gas [Unit Se O 34 In that from a Ton reverse NCE Ins of the Oil (In given is true:	or Dry Twp 19 ny other lesside if near	EFF 9-1-91 Gas [] Rge. 125 Esse or pool, Cessary. Division have	Address (Give address to P.O. BOX 1183. H. Address (Give address to FIARE Is gas actually connected give commingling order OIL Co. APPROVED	OUSTON, TEXAS o which approved copy of I when I wh	77001 This form is to Part 4-15 Ling VISION By S Cfor with RULE newly drilled tabulation of	be sent) TD-3 -88 Ip. 1104. I or deepened
Name of Authorized Transporter of OII THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and V VI. CERTIFICATE OF COMPLIAN I hereby certify that the rules and regulation been complied with and that the information my knowledge and belief.	or C JRLOCK PERI Inghead Gas Unit Se O 34 In that from a On reverse NCE In given is true:	or Dry Twp 19 ny other lesside if near	EFF 9-1-91 Gas [] Rge. 125 Esse or pool, Cessary. Division have	Address (Give address to D. O. BOX 1183. H. Address (Give address to FIARE Is gas actually connected give commingling order OIL C. APPROVED TITLE This form is to If this is a required taken on the Mail sections of	OUSTON, TEXAS o which approved copy of APR 1 & 198 Original Signed Mike William Oil & Gas Inspection of a compliance well in accordance with this form must be fille	77001 This form is to Part 4-15 Chg VISION By S Cfor with RULE newly drilled tabulation of th RULE 111.	be sent) TD-3 -88 Dp. 1104. I or despense the deviation
Name of Authorized Transporter of OII THE PERMIAN CORP. SCI Name of Authorized Transporter of Cast If well produces oil or liquids, give location of tanks. If this production is commingled with NOTE: Complete Parts IV and V VI. CERTIFICATE OF COMPLIAN I hereby certify that the rules and regulation been complied with and that the information my knowledge and belief. Sheila Weach (Signate Signate)	or C JRLOCK PERI Inghead Gas Unit Se O 34 In that from a On reverse NCE In given is true:	or Dry Twp 19 ny other lesside if near	EFF 9-1-91 Gas [] Rge. 125 Esse or pool, Cessary. Division have	Address (Give address to D. O. BOX 1183. H. Address (Give address to FIARE Is gas actually connected give commingling order OIL C. APPROVED TITLE This form is to 1f thin is a requirement, thin form must test taken on the table on new and recombined to the state of the state o	OUSTON, TEXAS o which approved copy of APR 1 & 198 Original Signed Mike William Oil & Gas Inspection of a compliance well in accordance with this form must be fille	77001 This form is to Part 4-15 Chg VISION By S Cior with RULE newly drilled tabulation of the RULE 111. d out complete	be sent) TD-3 -88 Dp. 1104. I or despense the deviation of the deviation of the sent

Separate Forms C-104 must be filed for each pool in multiply completed wells.