

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	<input checked="" type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PROMOTION 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

RECEIVED

OCT 03 '88

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA, OFFICE

I. Operator
PENNZOIL EXPLORATION AND PRODUCTION COMPANY

Address
P. O. DRAWER 1828, MIDLAND, TX 79702-1828

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 type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)
NOTIFICATION OF COMPANY NAME CHANGE
FROM PENNZOIL COMPANY TO PENNZOIL
EXPLORATION AND PRODUCTION COMPANY

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

EFFECTIVE 10-1-88

Lessee Name Big Eddy Unit	Well No. 12	Pool Name, including Formation Big Eddy Bone Spring	Kind of Lease State, Federal or Fee Federal	Lease No. NM 04082
Location Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line of Section 21 Township 20 S Range 31 E , NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

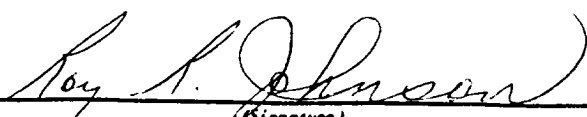
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian SCURLOCK PERMIAN CORP EFF 9-1-81	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, TX 79702-3119
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79765
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When D 21 20 31 Yes Unknown

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.


(Signature)
PRODUCTION ACCOUNTANT
(Title)
OCTOBER 1, 1988
(Date)

OIL CONSERVATION DIVISION

OCT 06 1988

APPROVED _____, 19 ____
BY Original Signed By
Mike Williams
TITLE _____

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.