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ARTESIA OFFICESTATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTForm C-104
Revised 10-01-78
Format 00-01-80
Page 1

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
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OPERATOR	<input checked="" type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>

Operator Milton Wessels	
Address P.O. Box 90717 Houston, Texas 77090	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate Operator Change by Court Order

If change of ownership give name and address of previous owner **Glenn Cope 1604 Front St. Midland, Texas 79701**
Uriah Expl., Inc.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Levin-Fed. Com.	Well No. 1	Pool Name, including Formation No. 1 over Ranch Morrow	Kind of Lease State, Federal or Fee Fed.	Lease No. NM 14082
Location Unit Letter J : 2210 Feet From The East Line and 1980 Feet From The South Line of Section 30 Township 22 S Range 25 E , NMPL, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
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)
Uriah Exploration Line	P.O. Box 90717 Houston, Texas 77090
If well produces oil or liquids, give location of tanks.	Is gas actually connected? Yes When 12/19/81

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.

Milton Wessels
(Signature)
Operator
(Title)
12/18/84
(Date)

OIL CONSERVATION DIVISION
DEC 28 1984
APPROVED _____, 19____
BY **Original Signed By**
Leslie A. Clements
Supervisor District II
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 change 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.

Post ID-3
12-28-82
Chg. Op.