

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED

Form C-104  
Revised 10-31-78  
Format 06-01-83  
Page 1

FEB 1 '89

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.  
ARTESIA OFFICE

|                   |                                     |
|-------------------|-------------------------------------|
| DISTRIBUTION      |                                     |
| SANTA FE          | <input checked="" type="checkbox"/> |
| FILE              | <input checked="" type="checkbox"/> |
| U.S.G.S.          | <input type="checkbox"/>            |
| LAND OFFICE       | <input type="checkbox"/>            |
| TRANSPORTER       | <input checked="" type="checkbox"/> |
| OPERATOR          | <input checked="" type="checkbox"/> |
| PRODUCTION OFFICE | <input type="checkbox"/>            |

|                                                                                                                            |                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Operator<br>L & T OIL CO.                                                                                                  |                                                                                                                                                                                            |
| Address<br>2209 WEST INDUSTRIAL MIDLAND, TEXAS 79701                                                                       |                                                                                                                                                                                            |
| Reason(s) for filing (Check proper box)                                                                                    | Other (Please explain)                                                                                                                                                                     |
| <input type="checkbox"/> New Well<br><input type="checkbox"/> Recompletion<br><input type="checkbox"/> Change in Ownership | Change in Transporter of:<br><input type="checkbox"/> Oil<br><input checked="" type="checkbox"/> Dry Gas<br><input type="checkbox"/> Casinthead Gas<br><input type="checkbox"/> Condensate |

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

|                                                                                                                                                      |               |                                                         |                                                |                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------------------------------------------------|------------------------------------------------|-----------------------|
| Lease Name<br>WILDERSPIN FEDERAL                                                                                                                     | Well No.<br>1 | Pool Name, Including Formation<br>UNDESIGNATED WOLFCAMP | Kind of Lease<br>State, Federal or Fee FEDERAL | Lease No.<br>NM14768B |
| Location<br>Unit Letter F, 1980 Feet From The North Line and 1980 Feet From The West<br>Line of Section 11 Township 21S Range 27E, NMPM, EDDY County |               |                                                         |                                                |                       |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

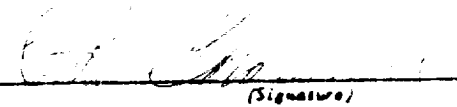
|                                                                                                                          |                                                                          |
|--------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |
| NAVAJO REFINING                                                                                                          | P. O. BOX 159 ARTESIA, NEW MEXICO 88210                                  |
| Name of Authorized Transporter of Casinthead 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) |
| PHILLIPS 66 NATURAL GAS COMPANY                                                                                          | 4001 PENBROOK, ODESSA, TEXAS 79762                                       |
| If well produces oil or liquids, give location of tanks.                                                                 | Unit Sec. Twp. Rgn. Is gas actually connected? When                      |
|                                                                                                                          | F 11 21S 27E yes 3/13/74                                                 |

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)  
President  
(Title)  
1-30-89  
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 9 1989  
BY Original Signed By  
Mike Williams  
TITLE

This form is to be filed in compliance with RULE 110a.  
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.