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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico  
Energy, Minerals and Natural Resources Department

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Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

NOV 14 '90

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

O. C. D.  
ARTESIA, OFFICE

I.

|   |   |                                     |
|---|---|-------------------------------------|
| Operator<br>DMS Oil Co. ✓   |   | Well API No.                        |
| Address<br>3000 Wilcrest, #250, Houston, Texas 77042                                    |   |                                     |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) |   |                                     |
| New Well <input type="checkbox"/>   | Change in Transporter of:               |                                     |
| Recompletion <input type="checkbox"/>   | Oil <input type="checkbox"/>            | Dry Gas <input type="checkbox"/>    |
| Change in Operator <input checked="" type="checkbox"/>                                  | Casinghead Gas <input type="checkbox"/> | Condensate <input type="checkbox"/> |

If change of operator give name and address of previous operator Meridian Oil Inc., #21 Desta Drive, Midland, Texas 79705

II. DESCRIPTION OF WELL AND LEASE

|   |               |   |  |                      |
|---|---------------|---|--|----------------------|
| Lease Name<br>Rocky Arroyo E  | Well No.<br>1 | Pool Name, including Formation<br>Rocky Arroyo Wolfcamp | Kind of Lease<br>State, Federal or Fee <input checked="" type="checkbox"/> FED | Lease No.<br>NM11947 |
| Location<br>Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>2130</u> Feet From The <u>East</u> Line<br>Section <u>7</u> Township <u>22-S</u> Range <u>22-E</u> , NMPM, <u>Eddy</u> 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"/><br><u>Navajo Crude Oil Co. (Attn: J. D. Miller)</u> | Address (Give address to which approved copy of this form is to be sent)<br><u>N. Freeman Ave., Artesia, NM 88210</u>  |                  |                     |                     |  |                         |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/><br><u>El Paso Natural Gas Company</u>       | Address (Give address to which approved copy of this form is to be sent)<br><u>P.O. Box 1492, El Paso, Texas 79978</u> |                  |                     |                     |  |                         |
| If well produces oil or liquids, give location of tanks.   | Unit<br><u>G</u>   | Sec.<br><u>7</u> | Twp.<br><u>22-S</u> | Rge.<br><u>22-E</u> | Is gas actually connected?<br><u>Yes</u> | When?<br><u>8-14-74</u> |

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

Signature Harry Williams  
Printed Name Harry Williams Title Asst. President  
Date Oct 22 1990 Telephone No. 505-37718

OIL CONSERVATION DIVISION

Date Approved NOV 16 1990

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

Post ID-3  
11-16-90  
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