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O. C. D. ARTESIA, OFFICE

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

## ---DISTRIBUTION SANTA PE FILE U.1.0.4. LAND OFFICE TRANSPORTER OIL

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

Form C-104 Revised 10-01-78 Format 06-01-63 Page 1

DEMIEST END ALLOWARIE

OPERATOR PROMATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
Emcor Petroleum, Inc.	/					
303 East 17th Avenue. Receson(s) for filing (Check proper box New Woll Recespiction X Change in Ownership	Charge (	n Trensporter	of:	Other (Pleasery Gas	se explain)	
change of ownership give name ad address of previous owner		Oil Co	mpany (	5800 Park Ten B	lvd., San Antonio, TX	78213
I. DESCRIPTION OF WELL AN		Pool Name	Including F	ormation _	Kind of Lease	Lease No.
Ocotillo Hills Comm.	1	Avalo	n <del>Wol</del> i	Ecamp Marrows	State, Federal or Fee State	K-4193
II. DESIGNATION OF TRANSI Name of Authorized Trensporter of Oil Navajo Crude 011 Purchs	sing Co.	OIL AND Condensate	X)	Address (Give address P.O. Drawer 17	to which approved copy of this form to the state of the s	·
Name of Authorized Transporter of Con Cabot Corporation	inghead Gas (2	∰ er Dry (	Gas [	P.O. Box 335.	- Naules leve, to. 10- 1 5 -Hobbs - NM 88240	37,6
If well produces oil or liquids, give location of tanks.	Unit Sec	. Twp.	Rge.	le gas actually connec	10d7 When 11-11-74	
I this production is commingled with NOTE: Complete Parts IV and NOTE: N	NCE ons of the Oil Congiven is true as	side if nece.	essary.	APPROVED  TITLE 5  This form is to if this is a request, this form must tests taken on the All sections of able on new and resident and	CONSERVATION DIVISION  UL 0 3 1984  Driginal Signed By Lestle A. Clements  upervisor Divirial II  to be filled in compliance with Ru  quest for allowable for a newly drive accompanied by a tabulation well in accordance with RULE of this form must be filled out com	illed or deepened of the deviation (11, pietely for allow-
(Dai				well name or numbe	sections I, II, III, and VI for en- r, or transporter, or other such cha a C-104 must be filled for each	nge of condition.