

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRODUCTION OFFICE	

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JUN 26 1986

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

O. C. D.
ARTESIA OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Kaiser-Francis Oil Company ✓

Address
P. O. Box 21468, Tulsa, OK 74121-1468

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) effective 5-7-86
<input type="checkbox"/> Recombination	<input type="checkbox"/> Oil	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner Quintero Refining Co., Inc., 37811
E. M. Nominee Partnership Company, 4582 S. Ulster St. Pkwy., Denver, CO 80237

II. DESCRIPTION OF WELL AND LEASE

Lease Name N. CARLSBAD COMMUNITY	Well No. 2	Pool Name, including Formation Happy Valley (Morrow)	Kind of Lease State, Federal or Fee Federal	Lease No. NM-0265356A
Location				
Unit Letter <u>B</u> : <u>660</u> Feet From The <u>FNL</u> Line and <u>1980</u> Feet From The <u>FEL</u>				
Line of Section <u>33</u> Township <u>21S</u> Range <u>26E</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"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 175, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Llano, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 1320, Hobbs, NM 88240
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
<u>B</u> <u>33</u> <u>21S</u> <u>26E</u>	<u>Yes</u> <u>5/21/76</u> <u>Post ID-2</u>

If this production is commingled with that from any other lease or pool, give commingling order number: 6-27-86
Chg Op

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

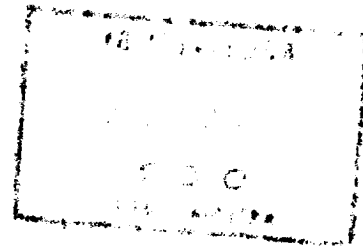
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

C. Van Valkenburg
Charlotte Van Valkenburg
Production Administrator
(Title)
6/19/86
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 27 1986, 19
BY Original Signed By
Les A. Clements
TITLE Supervisor District 11

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.



1871-1873
C. C. C.
1871-1873