

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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	GAS	✓
OPERATOR		✓
PRODUCTION OFFICE		✓

RECEIVED BY  
MAR -9 1987  
O. C. D.  
ARTESIA OFFICE  
OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Hondo Oil & Gas Company ✓  
Address  
P. O. Box 2208; Roswell, New Mexico 88201  
Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☒ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ casinghead Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)  
Change in Operator name  
Effective March 1, 1987

If change of ownership give name and address of previous owner  
ARCO Oil and Gas Company - Division of Atlantic Richfield Company  
P.O. Box 1610, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kurland Federal	Well No. 1	Pool Name, including Formation Burton Flat Strawn, West (Gas)	Kind of Lease State, Federal or Fee Fed	Lease No. NM0501759
Location Unit Letter <u>S</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>6</u> Township <u>21S</u> Range <u>27E</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"/> Koch Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558, Breckenridge, TX 76024	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Gas Company of New Mexico	Address (Give address to which approved copy of this form is to be sent) P.O. Box 26400, Albuquerque, NM 87125	
If well produces oil or liquids, give location of tanks. Unit <u>S</u> Sec. <u>6</u> Twp. <u>21S</u> Rge. <u>27E</u>	Is gas actually connected? Yes	when 12-22-76

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.

John P. DeKoven  
(Signature)  
Vice President  
(Title)  
2/27/87  
(Date)

OIL CONSERVATION DIVISION  
APPROVED MAR 16 1987, 19  
BY Les A. Clements  
Original Signed By  
Supervisor District 11  
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 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.