STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

** ** (***** *******

DISTAIBUTION	OH CONSERVATION DIVISION			Revised 10-01-78 Format 06-01-83	
rue /	RECEIVED BY	. BOX 2008		Page 1	
U. 6. O. 6.	SANTA FE,	NEW MEXICO 87	501		
LAND DEFICE	MAR 19 1987				
TRANSPONTEN OIL	DECUEET	TOD ALLOWANIE			
UPENATOM	J. J. D.	FOR ALLOWABLE AND	•		
PRONATION OFFICE	ARTESIA TRIODITATION TO TR	AND TROUBLAND A	JATHDAL CAC		
			WIORNE ONS		
Operator					
Hondo Oil and Gas Co	ompany				
P. O. Box 2208, Rosy	well, New Mexico 88201				
Reason(s) for liling (Check proper bos		Other (flease explain)		
New Well	New Well Change in Transporter of:		Effective March 1, 1987		
Recompletion	<u>⊠</u> ou [Dry Cas			
Change in Ownership	Cosinghead Gos	Condensate		,	
If change of ownership give name and address of previous owner					
I. DESCRIPTION OF WELL AN	D LEASE				
Leuse Name	Well No. Poul Name, Include	="	Kind of Lease		Lease
State BT Com.	l Avalon Mor	row Gas	State, Federal or Fee	State	L 670
Location					·
	wnship 21 Range		Feet From The We:		Cou
III. DESIGNATION OF TRANS	PORTER OF OIL AND NATU	RAL GAS			
	ot Condensate	•	iess to which approved copy of		-
Koch Oil Company	Instruct Co. 50	P. O. Box	1558, Breckenridge	, Texas 7	76025
El Paso Natural Gas	Company	P. O. Box	1384, Jal, NM 8825	52	
Gas Company of New M		P. O. Box	26400, Albuquerque,		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. C 16 215 261	_ i			A 1
	1		GCN	M 12/13/7	7 Post
f this production is commingled wit	th that from any other lease or po	ol, give commingling	order number:		<i>∠</i> -2
NOTE: Complete Parts IV and 1	on reverse side if necessary.				-cry
I. CERTIFICATE OF COMPLIA	01	OIL CONSERVATION DIVISION			
heteby certify that the rules and tegulation	APPROVED_	MAR 2 3 1987	. 1	19	
een complied with and that the information by knowledge and belief.	of		n :	•	
, ,		BY	Original Signed		
		TITLE	Les A. Clements		
-	•]]	Supervisor District		
Same Codl		This form is to be filed in compliance with AULE 1104. If this is a request for silowable for a newly drilled or deep well, this form must be accompenied by a tabulation of the days.			
(Signal	well, this form				
Production	tests taken on	the well in accordance with	h AULE 111.		
. (14)			s of this form must be filled d recompleted wells.	d out complete	aly for a
March 18, 1	· · · · · · · · · · · · · · · · · · ·	17	ly Sections I. II. III, and	VI for change	es of nu
(Date	e)	Wall name or our	mber, or transporter, or other		0, 14

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Lease No.

County

L 6705

		DIVISION

12/13/77 Port ID-3

APPROVED	MAR 2 3 1987	, 19
BY	' Original Signed By	
TITLE	Les A. Clements	
	Supervisor District II	

If this is a request for allowable for a newly drilled or decrened II, this form must be accompenied by a tabulation of the darietter its taken on the well in accordance with AULE 111.

All sections of this form must be filled out completely for allowle 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 auch change of condition

Separate Forms C-104 must be flied for each pool in multiply completed wells.