

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

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DEC 21 '88

Form C-104  
Revised 10-01-79  
Format 08-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
O. C. D.  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS. OFFICE

I. Operator  
Presidio Exploraiton, Inc. ✓

Address.  
3131 Turtle Creek Blvd, Suite 400 Dallas, TX 75219-5415

Reason(s) for filing (Check proper box) Other (Please explain)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	effective 11-1-88	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership			

If change of ownership give name and address of previous owner Liberty Oil & Gas Corporation P. O. Drawer 810 New Roads, LA 70760

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lee Federal Com.	Well No. 2	Pool Name, including Formation Burton Flat Morrow (pnorated gas)	Kind of Lease State, Federal or Fee Federal	Lease No. NM-17103
Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line of Section <u>25</u> Township <u>20S</u> Range <u>28E</u> , NMPM, <u>Eddy</u> County				

SCURLOCK PERMIAN CORP EFF 9-1-91

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183 Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Transwestern Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1188 Houston, TX 77251-1188
If well produces oil or liquids, give location of tanks. Unit <u>G</u> Sec. <u>25</u> Twp. <u>20S</u> Rge. <u>28E</u>	Is gas actually connected? <u>yes</u> When <u>POSTED-3</u> <u>1-13-89</u> <u>ckg ap</u>

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.

Kenneth Burr (Signature)  
Production Technician  
(Title)  
December 16, 1988  
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 6 1989, 19 \_\_\_\_\_  
BY Original Signed By  
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.