

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

RECEIVED

Form C-104
Revised 10-01-79
Format 06-01-83
Page 1

DEC 21 '88

O. C. D.
ARTESIA OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| | |
|------------------------|-------------------------------------|
| NO. OF COPIES RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | <input checked="" type="checkbox"/> |
| FILE | <input checked="" type="checkbox"/> |
| U.S.G.S. | <input type="checkbox"/> |
| LAND OFFICE | <input type="checkbox"/> |
| TRANSPORTER | <input checked="" type="checkbox"/> |
| OIL | <input checked="" type="checkbox"/> |
| GAS | <input checked="" type="checkbox"/> |
| OPERATOR | <input checked="" type="checkbox"/> |
| PRODUCTION OFFICE | <input checked="" type="checkbox"/> |

I. Operator
Presidio Exploraiton, Inc.

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

Reason(s) for filing (Check proper box)

| | | |
|--|---|------------------------|
| <input type="checkbox"/> New Well | Change in Transporter of: | Other (Please explain) |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> Oil | |
| <input checked="" type="checkbox"/> Change in Ownership effective 1-1-88 | <input type="checkbox"/> Casinghead Gas | |

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 | Well No. 4-1 | Pool Name, including Formation Avalon Bone Spring, East | Kind of Lease State, Federal or Fee Federal | Lease No. NM-17103 |
| Location Unit Letter L : 2100 Feet From The South Line and 660 Feet From The West | | | | |
| Line of Section 25 Township 20S Range 28E, NMPM, Eddy County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

| | |
|--|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input 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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company | Address (Give address to which approved copy of this form is to be sent) Bartlesville, OK 74004 |
| If well produces oil or liquids, give location of tanks. | Is gas actually connected? When |
| Unit L Sec. 25 Twp. 20S Rge. 28E | yes |

If this production is commingled with that from any other lease or pool, give commingling order number: 1-13-89

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

OIL CONSERVATION DIVISION

APPROVED _____, 19____
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.