

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

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MAR 29 '88

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

O. C. D.  
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REQUEST FOR ALLOWABLE  
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS DEC 08 1995

Operator OXY USA Inc.		OIL CON. DIV.	
Address P. O. Box 50250, Midland, TX 79710		DIST. 2	
Reason(s) for filing (Check proper box)		Other (Please explain)	
<input type="checkbox"/> New Well	Change in Transporter of:	Change of operator's name	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	effective April 1, 1988	
<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 Cities Service Oil & Gas Corp., P. O. Box 50250, Midland, TX 79710

II. DESCRIPTION OF WELL AND LEASE

Lease Name Villa A Com.	Well No. 1	Pool Name, including Formation North Loving Morrow	Kind of Lease State, Federal or Fee	Lease No. Fee
Location				
Unit Letter K	1650	Feet From The South	Line and 1980	Feet From The West
Line of Section 8	Township 23S	Range 28E	NMPM,	Eddy 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"/>	Address (Give address to which approved copy of this form is to be sent)
NONE	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	P. O. Box 1384 - Jal, New Mexico 88252
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
	Yes 10-9-79

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.

*F. A. Vitrano*

(Signature) F. A. Vitrano

District Operations Manager - Production

(Title)

March 15, 1988

(Date)

OIL CONSERVATION DIVISION

MAY 1 1988

APPROVED \_\_\_\_\_, 19

BY Original Signed By  
Mike Williams

TITLE Oil & Gas Inspector

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 deviated 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 multiple completed wells.