

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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"/>

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

RECEIVED

JUN 07 '88

Form C-104
Revised 10-01-78
Format 06-01-83
RECEIVED

O. C. D.
ARTESIA, OFFICE

JUN 20 '88

O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Devon Energy Corporation	
Address 1500 Mid-America Tower, 20 N. Broadway, Oklahoma City, OK 73102	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Condensate

If change of ownership give name and address of previous owner: Texas American Oil Corporation, 300 West Wall, Suite 400, Midland, TX 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name Todd "23" Federal	Well No. 3	Pool Name, including Formation Undesignated Sand-Dunes A-OKA	Kind of Lease State, Federal or Fee Federal	Lease No. 0405444
Location Unit Letter <u>J</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1800</u> Feet From The <u>East</u> Line of Section <u>23</u> Township <u>23S</u> Range <u>31E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 8700 Tesoro Dr., San Antonio, Texas 78286
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) P.O. Box 283, Houston, Texas 77001
If well produces oil or liquids, give location of tanks. Unit <u>J</u> Sec. <u>23</u> Twp. <u>23S</u> Rge. <u>31E</u>	Is gas actually connected? <u>Yes</u> When <u>June 3, 1983</u>

If this production is commingled with that from any other lease or pool, give commingling order number: POST 10-3

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.

J.M. Duckworth
(Signature)
J.M. Duckworth, District Engineer
(Title)
May 17, 1988
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 22 1988, 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 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.