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STATE OF NEW MEXICO	JUL -:	L 1907				
ENERGY AND MINERALS DEPARTMENT	O. C	. D.		Form C-104		
	ARTESIA,	OFFICE		Revised 10-01-78		
DISTRIBUTION	OIL CONSERVA	TION DIVISI	ON	Format 06-01-83 Page 1		
SANTA FE	P. O. BOX 2080					
U.8.0.8.	SANTA FE, NEV	MEXICO 87501				
LAND OFFICE						
TRANSPORTER BAS	TRANSPORTER					
PROBATION OFFICE	AND					
T	AUTHORIZATION TO TRANS	PORT OIL AND NAT	URAL GAS			
Operator						
Ford Chapman & Associate	s					
Address			,			
c/o Oil Reports & Gas Ser	vices, Inc., Box 755.	Hobbs, NM 8824	1			
Reeson(s) for filing (Check proper box)		Other (Plea				
New Well	Change in Transporter of:					
Recompletion		y Gas Eff.	July 1, 1987			
Change in Ownership	Casinghead Gas Ca					
If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND L	EASE	. <u></u>	· · · · · · · · · · · · · · · · · · ·	LC-061581		
Lease Name	Well No. Pool Name, Including F		Kind of Lease State, Federal or Fee	Lecae No.		
Gulf Federal	2 Brushy Draw D	elaware	Sidie, Federal of Fee	FEderal Above		
Location Unit Letter N : 990	Feet From TheSouthLin	and <u>1650</u>	Feet From The	West		
Line of Section 24 Townsh	ip 265 Plange	29E , NMP	м, <u>Eddy</u>	County		
III. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL	GAS				
Name of Authorized Transporter of Oll		Address (Give address	to which approved copy o	f this form is to be sent)		
			8210 Post JD-3			
Name of Authorized Transporter of Casingh	Address (Give address	to which approved copy o	7-10-87			
		Is gas actually connec	ted? When	chy WT: PER		
If well produces oil or liquids, Un			1	0		
Language and the second s	F 24 26S 29E	<u>          No                          </u>	h			
If this production is commingled with th	at from any other lease or pool,	give commingling ord				
NOTE: Complete Parts IV and V on	a reverse side if necessary.					
VI. CERTIFICATE OF COMPLIANCE			CONSERVATION DI	VISION		
I hereby certify that the rules and regulations of the Oil Conservation Division have		APPROVED	JUL 7 1987	, 19		
been complied with and that the information give	Orig	inal Signed By	-			
my knowledge and belief.		i 8Y	A. Ciements			
		TITLE Supervisor District 14				

I

Monne Hallo

 (Signature)	
Agent	
(Tule)	
6-30-87	
(Date)	

( PPROVED	JUL 7 1987	5ION 19
Y NOVED	Original Signed By	
	Les A. Clements	

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 AULE 111.

All sections of this form must be filled out completely for allow-able on new and recompleted wells.

Fill out only Sections 1, 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.