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LAND OFFICE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
TRANSPORTER	OIL <input checked="" type="checkbox"/>	GAS <input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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

RECEIVED

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

JUL 06 '88

I. Operator Terra Resources, Inc. O. C. D.
ARTESIA, OFFICE

Address 10 Desta Dr., Suite 500 West, Midland, Texas 79705

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	<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 Apache Corp., 7666 E. 61st, 500 Triad Center, Tulsa, OK 74133

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Ross Draw Unit</u>	Well No. <u>10</u>	Pool Name, including Formation <u>Ross Draw - Morrow</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No.
Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line of Section <u>27</u> Township <u>26S</u> Range <u>30E</u> , NMPM, <u>Eddy</u> 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"/> <u>Koch Services, Inc.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1558, Breckinridge, TX 76024</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <u>El Paso Natural Gas Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1492 - El Paso, Tx 79978</u>	
If well produces oil or liquids, give location of tanks. Unit <u>E</u> Sec. <u>27</u> Twp. <u>26S</u> Rge. <u>30E</u>	Is gas actually connected? <u>Yes</u>	When <u>8-8-81</u> <u>Part FD-3</u>

If this production is commingled with that from any other lease or pool, give commingling order number: 7-15-88
chy op

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.

Penny E. Cozart
(Signature)
Penny E. Cozart, District Accountant
(Title)
6-28-88
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 11 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.