

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES REQUIRED	
ENTRUSTED	
SANTA FE	☒
FILE	☒
U.S.A.	
LAND OFFICE	
TRANSPORTER	☒
OPERATOR	☒
PRODUCTION OFFICE	

RECEIVED BY

NOV -6 1986

O. C. D.

ARTESIA OFFICE

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Permit 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Company <u>Mallon Oil Company</u>	
Address <u>1616 Glenarm #2850, Denver, CO 80202</u>	
Reason(s) for filing (Check proper box)	Other (Please explain)
☐ New Wellbore ☐ Recompleted ☒ Change in Ownership	Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Condensate Gas ☐ Condensate
Change in Operator	

If change of ownership give name and address of previous owner Worth Petroleum Company

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Amoco Federal</u>	Well No. <u>3</u>	Pool Name, including Formation <u>Brushy Draw-Delaware</u>	Kind of Lease State, Federal or Fed. <u>Federal</u>	Lease No. <u>NM-38636</u>
Location				
Unit Letter <u>J</u>	<u>2310</u> Feet From The <u>South</u> Line and <u>1681</u> Feet From The <u>East</u>			
Line of Section <u>27</u>	Township <u>26-S</u>	Range <u>29-E</u>	<u>NMPM</u>	Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ <u>The Permian Corporation</u>	Address (Give address to which approved copy of this form is to be sent) <u>P O Box 1183, Houston, TX 77001</u>
Name of Authorized Transporter of Condensate Gas ☒ or Dry Gas ☒ <u>Conoco Inc</u>	Address (Give address to which approved copy of this form is to be sent) <u>P O Box 2197, Houston, TX 77252</u>
If well produces oil or liquids, give location of tanks.	Unit <u>J</u> Sec. <u>27</u> Twp. <u>26-S</u> Rge. <u>29-E</u> Is gas actually connected? <u>yes</u> When <u>12-02-83</u>

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.


(Signature)

President

October 15, 1986

(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 7 1986, 19 _____

BY Las A. Clements
Original Signed By

TITLE Supervisor District II

This form is to be filed in accordance 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.