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90. 07 COPICO BECEIVED	OIL CONSERV	A FION DIVISION	
DISTRIBUTION	P. O. B	OX 2088	
SANTA FE	SANTA FE, NE	W MEXICO 87501	
U.S.G.S.			
LAND OFFICE	•		
TRANSPORTER OIL	REQUEST FOR ALLOWABLE		
GAS	AND		
OPERATOR	AUTHORIZATION TO TRANS	PORT OIL AND NATURAL GAS	
PROPATION OFFICE			·
	MPANY, INC.		
Address			
	FARMINGTON, N. M.		
	<u>-</u>		
Reason(s) for filing (Check proper box	<i>:)</i>	Other (Please explain)	
New Well	Change in Transporter of:	Nema chenus of	
Recompletion	OII Dry G	Name change of	operator.
Change in Ownership	Casinghead Gas Conde	nsate	
	Change name of one	rator from Kimbell Oil Co	0
If change of ownership give name		nc effective 1-1-83	•
and address of previous owner		TC ellective feles?	
DECORPORADO OF WELL AND	* PAGE		
DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Including F	ormation Kind of Leas	
			,
Salazar	6 Ballard	Pictured Cliffs State, Federa	ol or Federal SF-080136
Location			
Unit Letter G ; 18	OC1 Feet From The N Lin	ne and <u>1840*</u> Feet From	The E
			
Line of Section 34 To	waship 25N Range	6W , NMPM, R1c	Arriba County
			
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	16	
Name of Authorized Transporter of Oil		Address (Give address to which appro	eved copy of this form is to be sent)
			, , , , , , , , , , , , , , , , , , ,
New of National Transporter of Con-	standard Cas Co. Dry Cas Co.	Ndd-o-s (Cina add-o-s to which a	
Name of Authorized Transporter of Car		Address (Give address to which appro	
El Paso Natural		Box 1492, El Paso, Te	exas 79978
If well produces oil or liquids,	Unit Sec. Twp. Rgs.	Is gas actually connected? Wh	en
give location of tanks.		4.00	12/29/82
If this and nation is commission with	th that from any other lease or pool,		
it ture brounction is commingion wi	that hom any other rease or poor,	give comminging order number.	
COMPLETION DATA			
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.
COMPLETION DATA Designate Type of Completic		New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completic	on – (X)	New Well Workover Deepen	
			Plug Back Same Res'v. Diff. Res'v.
Designate Type of Completic	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Designate Type of Completic	Date Compl. Ready to Prod.		
Designate Type of Completic Date Spudded Elevations (DF, RKB, RT, GR, etc.)	Date Compl. Ready to Prod.	Total Depth	P.B.T.D. Tubing Depth
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Division have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.
La Alement
(Signature)
E. A. Clement, Agent
(Title)
¥-10-83
(Date)

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.