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## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

O. C. D.  
ARTESIA OFFICEForm C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Pelto Oil Company	
Address One Allen Center, 500 Dallas St, Suite 1800, Houston, TX 77002	
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"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner Stevens Operating Corp., P. O. Box 2203, Roswell, NM 88201

## II. DESCRIPTION OF WELL AND LEASE

Lease Name O'Brien "N"	Well No. 4	Pool Name, including Formation Twin Lakes - San Andres Assoc.	Kind of Lease State, Federal or Fee	Lease No. N/A
Location Unit Letter <u>N</u> : <u>1650</u> Feet From The <u>West</u> Line and <u>560</u> Feet From The <u>South</u> Line of Section <u>32</u> Township <u>8S</u> Range <u>29E</u> , NMPM, <u>Chaves</u> County				

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
N/A		
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit	Sec.
	Twp.	Rge.
Is gas actually connected?	When	
No		

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.

Bernie Malson (Signature)  
Production Administration Manager (Title)  
 \_\_\_\_\_ (Date)

## OIL CONSERVATION DIVISION

APPROVED NOV 17 1987, 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.