

clst
LT
Op

RECEIVED

MAY 21 1991

O. C. D.
ARTESIA OFFICE

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

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I. Operator PRIMERO OPERATING, INC.

Address PO BOX 1433, ROSWELL, NM 88202

Reason(s) for filing (Check proper box) Other (Please explain)

<input type="checkbox"/> New Well	<input type="checkbox"/> Change in Transporter of:	<u>CHANGE OF OPERATOR.</u>
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner SLASH FOUR ENTERPRISES

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Toltec</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Diable, San Andres</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No. <u>N/A</u>
Location Unit Letter <u>0</u> : <u>330</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>East</u>				
Line of Section <u>22</u> Township <u>10S</u> Range <u>27E</u> , NMPM, <u>Chaves</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Enron Oil Trading & Transportation Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>PO Box 2297, Midland, TX 79702</u>					
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) <u>Post FD-3</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>0</u>	Sec. <u>22</u>	Twp. <u>10S</u>	Rge. <u>27E</u>	Is gas actually connected? <u>NO</u>	When <u>2-14-92</u> <u>chg Op.</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.

Phelps White IV
(Signature)
Phelps White IV, President
(Title)
05/16/91
(Date)

OIL CONSERVATION DIVISION

APPROVED FEB 7 1992, 19____

BY ORIGINAL SIGNED BY
MIKE WILLIAMS

TITLE SUPERVISOR, DISTRICT II

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.