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Form C-104 Revised 10-01-78 Formal 06-01-83 Page 1

OISTRIBUTION SANTA FE FILE U.S.O.S. LAND OFFICE TRANSPORTER OPERATOR PROBATION OFFICE

STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GA

	NSPORT OIL AND NATURAL GAS	
Operator		
Hondo Oil & Gas Company		
P. O. Box 2208; Roswell, New Mexico 8820	•	
Rescents for filing (Check proper box)		
New Well Change in Transporter of:	Other (Please explain)	
Recompletion OII	Change in Operator name	
X Change in Ownership Casinghead Gas	Condensete Effective March 1, 1987	
If change of ownership give name APCO O41		_
end address of previous owner ARCO UIT and Gas Compa	ny - Division of Atlantic Richfield Company	
P. O. Box 1610, Midlan	d, Texas 79702	
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including		
I ** ** [Ιο.
Location 13 Grayburg Jac	kson-7R.Q.G.S.A. Stete, Federal or Fee Federal 029426	
Unit Letter G : 1980 Feet From The North		_
Unit Letter G: 1980 Feet From The North L	ine and 1980 Feet From The East	
Line of Section 10 Township 17S Range	31E NMPM Eddin	
III Deciculation of	Eddy Count	<u> </u>
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	IL GAS	
	Asaross (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casingheed Gas (X) or Dry Gas (7)	P. O. Box 2528, Hobbs, New Mexico 88240	
Continental Oil Company	to be sent;	
If well produces oil or liquids, Unit Sec. Twp. Rec.	P. O. Box 460, Hobbs, New Mexico 88240	
give location of tanks. F 10 175 31E	Yes 6-1-60	
f this production is commingled with that from any other lease or pool,		
NOTE: Complete Parts IV and V on reverse side if necessary.	Free communitating aides ufmodit	. `
y necessary.	n test of	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED MAR 1 6 1987	
seen complied with and that the information given is true and complete to the best of	. 19	
ny knowledge and belief.	By Original Signed By	_
	Les A. Clements	
	Supervisor Ostrict H	
Muse R. Newson	This form is to be filed in compliance with RULE 1104.	
() () (Signature) PROD SEC	If this is a request for allowable for a newly drilled or deepend well, this form must be accompanied by a tabulation of the deviation of the	ed on
	il reach taxed on the ment to secondance with MAPE 111"	
022787	All sections of this form must be filled out completely for siles shie on new and recompleted wells.	~
(Date)	Fill out only Sections I. II. III, and VI for changes of owne well name or number, or transported or other such change of condition	T,
	Separate Forms C-104 must be filed for each pool in multiple	n. I v
	completed wells.	. 1