DISTRICTI P.O.Box 1980, Hobbs, NM 88241-1980

DISTRICT II

P.O. Drawer DD, Artesia, NM 88211-0719

DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410

State of New Mexico

Laurgy, Minerals and Natural Resources Department.

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 RECEIVED

DEC - 6 1991

O. C. Sobmit 4 copies to appropriate ARTESIA CHECKE office

PERMIT TO TRANSPORT RECOVERED LOAD OIL

(NOTE: Required only when load oil was obtained from source other than lease on which used.)

	(See Rule 508, 1	1104, and 1126)		
RECOVERED LOAD OIL		ADDRESS		
OPERATOR		P.O. Box 1710, Hobbs, NM 88240		
ARCO Oil and Gas Company LEASENAME	WELL NO.	POOL BOX 17	10, HODDS, NM 88	COUNTY
Empire Abo Unit	L-14	Empire Abo		Eddy
Unit N, Sec. 2, T18S, R27E		Amoco Pipeline Company		
	BBLS, LOAD OI			
	BBED. BOND ON	<u> </u>		
	64	1		
SOURCE OF LOAD OIL	PURCHA	SED OIL		
BARRELS PURCHASED		DATE PURCHASED		
64		12/04/91		
PURCHASED FROM		ADDRESS		
Amoco Plant		P.O. Box 70, Artesia, NM 88210		
BARRELS PURCHASED		DATE PURCHASE		
PURCHASED FROM		ADDRESS		
	TRANSFERRED FROM			Necephen
BARRELS TRANSFERRED POOL FROM WHICH TRANS		FERRED LEASE FROM WHICH TRANSFERRED		
DATE OF LETTER OF NOTIFICATION O	E TRANSFER IN COMPLIANC	E WITH RULE 1104	(F)	
DATE OF LETTER OF NOTE ICATION O	i indicata a com an a c		()	
BARRELS TRANSFERRED	POOL FROM WHICH TRANSFERRED		LEASE FROM WHICH TRANSFERRED	
BARRELS TRANSFERRED	POOLING WHICH HOUSE EACH			
DATE OF LETTER OF NOTIFICATION O	F TRANSFER IN COMPLIANCE	E WITH RULE 1104	(F)	
	1-2-2	CERRED	LI FACE PROMUNITOR TR	Necephen
BARRELS TRANSFERRED	POOL FROM WHICH TRANS	SPEKKED	LEASE FROM WHICH TRA	INSPERRED
DATE OF LETTER OF NOTIFICATION O	TO ANGEED IN COMPLIANCE	E WITH RUI E 1104	<u> </u> (F)	
DATE OF LETTER OF NOTIFICATION O	r irandi er et comi es etc		(•)	
OPERATOR: I hereby certify the information	above is true and complete to	OIL CONSE	RVATION DIVISIO	
best of pdy knowledge and belief		ORIGINAL SIGNED BY		
Signature Tully W. Munich	yo: James	Approved by:_	MIKE WILLIAMS SUPERVISOR, DI	STRICT II
Printed Name James D. Cogburn, Op	erations Coordinat	orTitle:	SUFERVISOR, DE	J.11107 11
& Title		Date:	DEC 1 3 199	1

Date:

_Telephone No<u>505-392-1621</u>

Date 12/05/91