

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

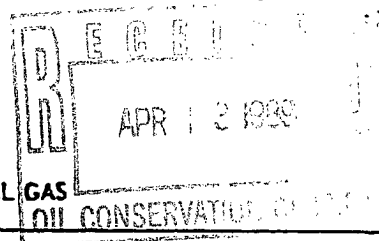
NO. OF SERIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.O.J.		
LAND OFFICE		
TRANSPORTER	OIL	
	NAT	
OPERATION		
PRODUCTION OFFICE		

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



I.

Operator Lynx Petroleum Consultants, Inc.	
Address P. O. Box 1666, Hobbs, NM 88241	
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"/> Gas <input type="checkbox"/> Condensate Effective 03/01/89

If change of ownership give name and address of previous owner Saba Energy Inc., 4500 W. Illinois, Suite 213, Midland, TX 79707

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hill A	Well No. 8	Pool Name, including Formation Eumont - Oil	Kind of Lease Fee	Lease No.
Location Unit Letter M : 3630 Feet From The South Line and 877 Feet From The West Line of Section 6 Township 21S Range 37E NMPM, Lea 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"/> Shell Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1910, Midland, TX 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks. Unit M Sec. 6 Twp. 21S Rge. 37E	Is gas actually connected? Yes When 1/10/72

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.

MacVine
(Signature)
President
(Title)
04/06/89
(Date)

APPROVED **APR 10 1989**
BY *[Signature]*
TITLE **DISTRICT 1 SUPERVISOR**

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.