## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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|-------------------|------|---|---|
| DISTRIBUTIO       | D44  | П | T |
| SANTA PE          |      |   | П |
| PILE              |      |   |   |
| U.S.G.A.          |      |   |   |
| LAMB OFFICE       |      |   |   |
| TRAMSPORTER       | 914  |   |   |
|                   | GAS  |   |   |
| OPERATOR.         |      |   |   |
| POGEATION OF      | -    |   |   |

## 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

| [.  | AUTHORIZ  | EATION TO TRAN          | SPURT OIL                       | AND NATU                                 | IRAL GAS   |  |                                       |  |
|---|---|-------------------------|---------------------------------|--|--|--|---------------------------------------|--|
| American Explorati  | on Company  |                         |                                 |  |  | <del></del>  |                                       |  |
| Address   | <u> </u>  |                         | <del> </del>                    |  |  |  |                                       |  |
| 2100 RepublicBank (Research of Filing (Check proper b                                 | Center, Hous  | ton, Texas 7            | 7002                            |  |  |  |                                       |  |
| New Well  | Change in Transporter of:   |                         |                                 | Other (Please explain)                   |  |  |                                       |  |
| Recompletion  | <u></u> 011   |                         | Dry Gas                         |  |  |  |                                       |  |
| Change in Ownership   | Cesting   | hood Gas 🔲              | Condensate                      |  |  |  |                                       |  |
| If change of ownership give name  |   |                         |                                 |  |  |  |                                       |  |
| and address of previous owner   | Kirby Expl  | oration Comp            | any of                          | ľexas. P                                 | 0. Box 1745,                                     |  | <u>Texas</u><br>77251                 |  |
| II. DESCRIPTION OF WELL A   |   | ****                    |                                 |  |  |  | 77231                                 |  |
| Vada Pruitt   | 1   | Vada Pennsy             |                                 |  | Kind of Lease<br>State, Federal or Fee           | Fee  | Ledse No.                             |  |
| Location  | <u> </u>  |                         |                                 |  | Sides, Federal of Fed                            | <del></del>  | <u> </u>                              |  |
| Unit Letter L   | 2130 Feet From  | The South L             | ine and                         | 660                                      | Feet From The                                    | Vest   |                                       |  |
| -   |   |                         |                                 |  |  |  | · · · · · · · · · · · · · · · · · · · |  |
| Line of Section 14 T  | ownship 95  | Range 3                 | 4E                              | , NMPM                                   | . Lea  | · · · · · · · · · · · · · · · · · · ·  | County                                |  |
| III. DESIGNATION OF TRAN  | SPORTER OF OF   | I. AND NATIIRA          | I GAS                           |  |  |  |                                       |  |
| Name of Authorized Transporter of C   | II 🔀 or Cone  | iensate                 | Address (                       |  | o which approved copy o                          |  |                                       |  |
| The Permian C <del>orporation</del>   |   |                         | ;                               | P.O. Box 1183, Houston, Texas 77251-1183 |  |  |                                       |  |
| Name of Authorized Transparter of C   | asinghead Gas   | or Dry Gas 🗀            | Address (                       | Give address i                           | o which approved copy o                          | of this form is to   | be sent)                              |  |
| If well produces oil or liquids,  | Unit Sec.   | Twp. Rge.               | Is gas actually connected? When |  |  |  |                                       |  |
| give location of tanks.   | L 14  | 9S 34E                  | . No                            |  | ,<br>I   |  |                                       |  |
| If this production is commingled v  | vith that from any  | other lesse or pool,    | give comm                       | ingling order                            | number:  |  |                                       |  |
| NOTE: Complete Parts IV and   | l V on reverse side   | e if necessary.         |                                 |  |  |  |                                       |  |
|   |   | ,                       | 11                              | 011 0                                    | THEFOLIATION OF                                  |  |                                       |  |
| VI. CERTIFICATE OF COMPIL   | ANCE  |                         |                                 | بالد الد                                 | DNSERVATION DI                                   | IVISION  |                                       |  |
| I hereby certify that the rules and regula<br>been complied with and that the informa |   |                         |                                 | VED <u>Con</u>                           | <u> </u>   | ,  |                                       |  |
| my knowledge and belief.  | don given is true and o   | complete to the best of | BY                              |  | AL SIGNED BY JER                                 |  |                                       |  |
|   |   |                         |                                 |  | DISTRICT LEUPERVI                                | SOR  |                                       |  |
|   | _   |                         | TITLE                           | <del></del>                              |  |  |                                       |  |
| - Koul Su   | wood  |                         | 12                              |  | be filed in compliant                            |  |                                       |  |
|   | mature)   |                         | well, th                        | is form must                             | est for allowable for a                          | tabulation of  | the deviation                         |  |
| Production Admi   |   |                         | teets to                        | ken on the w                             | ell is accordance wi                             | th RULE 111.   |                                       |  |
| Μay 1, 1988   | (Title)  All sections of this form must be filled out completely able on new and recompleted wells. |                         |                                 |  |  |  |                                       |  |
|   | ate)  |                         | Fill well nes                   | out only 3.                              | ections I, II, III, and or transporter, or other | VI for changer to the change of the change o | es of owner,                          |  |
|   |   |                         | Sep                             | erete Forms                              | C-104 must be filed                              | for each poo   | i in multiply                         |  |