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LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
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

X I.

Operator Kelly H. Baxter	
Address P.O. Box 11193, Midland, TX 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner _____

Y II. DESCRIPTION OF WELL AND LEASE

Lease Name Rob Clay State	Well No. 1	Pool Name, including Formation East Caprock, Devonian	Kind of Lease State, Federal or Fee State	Lease No. B-9948-6
Location Unit Letter <u>F</u> ; <u>1980'</u> Feet From The <u>West</u> Line and <u>1650'</u> Feet From The <u>North</u> Line of Section <u>23</u> Township <u>12S</u> Range <u>32E</u> , NMPM, <u>Lea</u> County				

X III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Tesoro Crude Oil Company	Address (Give address to which approved copy of this form is to be sent) 8700 Tesoro Dr., San Antonio, TX 78286 Enron Oil Trading & Transportation Co. P.O. Box 1188 Houston, TX 77251-1188 Effective 7-1-88					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> NONE, Tesoro	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 23	Twp. 12S	Rge. 32E	Is gas actually connected? No	When

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.

X 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.

Kelly H. Baxter
(Signature)
Owner
(Title)
10/7/87
(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 13 1987, 19____
BY _____ Orig. Signed by
Paul Kautz
Geologist
TITLE _____

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 allow-
able 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.

of the Department of Agriculture
and the Department of the Interior
to the Department of the Interior
at the Department of the Interior

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