STATE OF NEW MEXICO			Form C-104 Revised 10-1-78
DISTRIBUTION		RVATION DIVISION	KETISED (U-1-78
SANTA FE		O. BOX 2088	
FILE	SANTA FE,	NEW MEXICO 87501	
U.S.G.S.			
······	REQUES	T FOR ALLOWABLE	
TRANSPORTER CAS		AND	
OPERATOR	AUTHORIZATION TO TR	RANSPORT OIL AND NATURAL (GAS
PROMATION OFFICE			
MR Oil Compa	anv		
Address			
P. O. Box 68	35, Monahans, Texas 7975	6	
Reason(s) for filing (Check proper		-	
New Well X	Change in Transporter of:	Other ANST CHER	TER MUST NOT BE
Recompletion			
Change in Ownership			EXCEDUION
		Condensate IS OBTAINE	D. 10 R-4070
If change of ownership give nat and address of previous owner.		·	
DESCRIPTION OF WELL A			
Lease Name Northeast	Well No. Pool Name, includ	ing Formation Kind o	f Lease Lease No
Caprock Queen Unit	35Y Caprock Q	ueen	Federal or Fee
Location			
Unit Letter N ;	1265 Feet From The South	_Line and2565 Feet	From The West
Line of Section 16	Township T12S Range	R32E , NMPM,	Lea County
ESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL	GAS	
Name of Authorized Transporter of	OU Or Condensate		approved copy of this form is to be sent)
Southern Union	K.V. (IA	f f	
	NEA. D.		
		Address (Give address to which	
Name of Authorized Transporter of		Address (Give address to which	approved copy of this form is to be sent)
Name of Authorized Transporter of	Cashigh ad Gas or Dry Gas		approved copy of this form is to be sent;
	Castfighed Gas or Dry Gas Unit Sec Twp Rge.	ls gas actually connected?	
Name of Authorized Transporter of If well produces oil or liquids, give location of tanks.	Cashigh and Gas or Dry Gas Unit Sec. Twp. Res. P 16 12S 3:	. 1s gas actually connected? 2E No	approved copy of this form is to be sent) When
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Division	have been complied v	and regulations of the Oil (with and that the informat the best of my knowledg	ion given
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APPROV	ED FEB 15 1984	
	ORIGINAL SIGNED BY JERRY SEXTON	
TITLE	DISTRICT I SUPERVISOR	

Chies Hall
(Signature)
Production Manager
(Title)
February 7, 1984
(Date)

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 to completed wells.

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