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TRANSPORTER	OIL
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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

707403

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 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 \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ronalto	Well No. 1	Pool Name, including Formation East Caprock, Penn	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>K</u> : <u>1650</u> Feet From The <u>West</u> Line and <u>2310</u> Feet From The <u>South</u> Line of Section <u>14</u> Township <u>12S</u> Range <u>32E</u> , NMPM, <u>Lea</u> County				

FOIT Energy Operating LP  
Effective 7-1-84

FOIT Energy Corp  
Effective 1-1-93

Enron Oil Trading & Transportation Co.  
P.O. Box 1188  
Houston, TX. 77251-1188 Effective 7-1-88

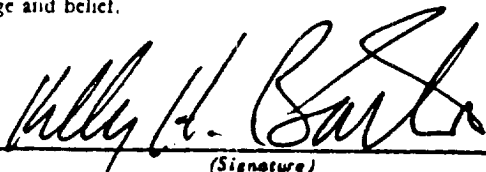
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Casinghead Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Tesoro Crude Oil Company	8700 Tesoro Drive, San Antonio, TX 78286					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Warren Petroleum (no change)						
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 14	Twp. 12S	Rge. 32E	Is gas actually connected? yes	When 12/4/84

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.



Owner

(Title)

10/7/87

(Date)

OIL CONSERVATION DIVISION

APPROVED Oct 13, 1987, 19  
BY Orig Signed by Paul Kautz  
TITLE Geologist

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.