## STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
BANTA PE		1	1
FILE			
U.S.O.S.			
LAND OFFICE		1	
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION 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

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSI	PORT OIL AND NATURAL GAS		
Operator			
Breck Operating Corp	•		
Address			
P.O. Box 911, Breckenridge, Texas 76024			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	·		
	ry Gas		
X Change in Ownership Casinghead Gas Ca	ondensate		
If change of ownership give name Union Texas Petroleum Con and address of previous owner Union Texas Petroleum Con	rp., P.O. Box 2120, Houston, Texas 77252		
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, Including F			
Milnesand Unit 121 Milnesand-San	Andres State, Federal or Fee Fee		
Unit Letter M : 660 Feet From The South Lin  SW SW Line of Section 7 Township 8S Range 35			
Cine of Section			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS		
Name of Authorized Transporter of Oil V or Condensate	Address (Give address to which approved copy of this form is to be sent)		
Mobil Pipeline Company	P.O. Box 900, Dallas, Texas 75221		
Name of Authorized Transporter of Casinghead Gas X or Dry Gas	Address (Give address to which approved copy of this form is to be sent)		
Warren Petroleum Company	.O. Box 1589, Tulsa, Oklahoma 74102		
If well produces oil or liquids, que location of tanks.  Unit Sec. Twp. Rge.  M 7 8S 35E	Yes 11-4-62		
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	OIL CONSERVATION DIVISION NOV 7 - 1985		
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	APPROVED, 19		
my knowledge and belief.	ORIGINAL SIGNED BY JERRY SEXTON		
	TITLE DISTRICT I SUPERVISOR		
A A A D A A	This form is to be filed in compliance with RULE 1104.		
Signature)  Elizabeth Smith  If this is a request for allowable for a newly d well, this form must be accompanied by a tabulation			
Production Clerk (Title)	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
October 31, 1985	Fill out only Sections I, II, III, and VI for changes of owner,		
(Date)	well name or number, or transporter, or other such change of condition.		