STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			1	
BANTA PE				
FILE			· · · ·	
V.1.a.s.				
LAND OFFICE				
TRANSPORTER	OIL			
	DAS			
OPERAYOR				
PRONATION OFF				

I.

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

				a second seco	
Operator			•		
Breck Operating Corp		· .			•
Address		· ·			<u> </u>
P.O. Box 911, Brecker	ridge, Texas	76024			
ason(s) for filing (Check proper box) Other (Please explain)					
Now Well	Change in Transporte	r ol:			
Recompletion		Dry Gas			
X Change in Ownership	Casinghead Gas	Condensate			
			*	· · · · · · · · · · · · · · · · · · ·	
If change of owners: give name and address of previous owner Unic	on Texas Petro	leum Corp., P.	0. Box 21	120, Houston, Texas 7725	2
and address of previous owner	. <u> </u>	,			· · · · · · · · · · · · · · · · · · ·
II. DESCRIPTION OF WELL AND LI	EASE				
Lease Name	Well No. Pool Name,	Including Formation	ormation Kind of Lease		Locae No.
Milnesand Unit	311 Milnes	and-San Andres		State, Federal or Fee Federal	LC060978
Location		<u></u>	<u> </u>		
Unit Letter B : 660	Free Free The NO	orth ine and	1980	Fast From The East	
Unit Letter:	restricm ins				
NW NE Line of Section 19 Townshi	r 85	Range 35E	, NMPM	. Roosevelt	County
•					
III. DESIGNATION OF TRANSPORT	IER OF OIL AND	NATURAL GAS			
Name of Authorized Transporter of Cill or Condensate Address (Give address to which approved copy of this form is to be sent)					
Mobil Pipeline Company		P.O.	P.O. Box 900, Dallas, Texas 75221 Addreas (Give address to which approved copy of this form is to be sent)		
Name of Authorized Transporter of Casingh-	ead Gas y or Dry	Gas 🗍 Addreas	(Give address 1	to which approved copy of this form is t	be sent]
Warren Petroleum Company	21	PO	Box 1589	Tulsa, Oklahoma 74102	
	1 Sec. Twp.		tually connect		
If wall produces oil or liquids, give location of tanks.	C 19 8S	35E	Yes	9-19-63	
If this production is commingled with th	at from any other lea	se or pool, give com	ningling 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.

Smit1 (Signature) Production Clerk (Title) October 31, 1985 (Date)

OIL CONSERVATION DIVISION
APPROVED NOV 7 - 1985
DRIGINAL SIGNED BY JERRY SEXTON

TITLE _____

This form is to be filed in compliance with RULE 1904.

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 AULX 111.

DISTRICT I SUPERVISOR

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.