## STATE OF NEW MEXICO ENERGY AND MINERALS CEPARTMENT

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SANTA FE	į	Π			
FILE		l			
U.3.G.4.					
LAND OFFICE		1	1		
TRAMEPORTER	OIL				
	SAS	į			
PERATOR	1				
PROBATION OFFICE					

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

Form C-194 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forma C-104 must be filled for each pool in multiply completed wells.

GAS		RECU	EST FO	R ALLOW	ABLE		•	
OPERATOR			A	מא,		· ·		
PROBATION OFFICE	AUTHOR	IZATION TO	TRANS	PORT OIL	AND NATU	RAL GAS		
I.								
Operator							<del></del>	
Time Odd and Chambard Co					•	•		
Fina Oil and Chemical Co	Mingria					<del></del>		
Addises								
Box 2990, Midland, TX	79702				-			
Reason(s) for filing (Check proper box)					Other (Please	: explainj		
New Well	Change in Transporter of:			-	•			
<b>∤</b> ≍ :	011	•		Dry Gaz Change of Company Name effective		e 7-01-85.		
Recompletion		1	=					
Change in Ownership	Castr	ahead Gas	c	ondensate		Injection Well		
If change of ownership give name and address of previous owner Am	erican	Petrofina	а Сотр	any of	Texas, Bo	ox 2990, Midland,	TX 7	9702
and reduced of provided of the								
II. DESCRIPTION OF WELL AND L	FASF							
Lease Name	Well No.	Pool Name, In	ciuding F	ormation		Kind of Lease		Legse No.
							, ,	_
Horton Federal	12	<u>Milnesa</u>	and Sa	n Andre	es	State, redetat of ree Fe	ederal	0145685
Location		•						
Unit Letter N : 990	Feet Fro	The South	L:r	n= andl	650	Feet From The West		
Line of Section 30 Townsh	ip	8 R	ange	35	, NMPM	. Roosevelt		Caunty
								·
III. DESIGNATION OF TRANSPOR	TER OF	OIL AND N	ATURA!	L GAS				
Name of Authorized Transporter of Cil	or C	elbenebno		Acatess	Give address	to which approved copy of thi	s form is to	be sent)
		O		1 1 1 1 1 1 1 1 1	(Cina addraga	to which approved copy of thi	. (0 1 1	
Name of Authorized Transporter of Casings	redd Cas i	or Dry Ga	s 🖳	Youress	Othe aggress :	to which approved copy of thi	2 Journe 12 10	, se sent,
				1				
Un Un	it Sec.	Twp.	Rge.	is que do	tually connect	ed? When		
If well produces oil or liquids, give location of tanks.	1	1	1	1		1		
		<del>i</del>	·	<del></del>		<del></del>		
If this production is commingled with th	ist from an	y other lesse	or pool,	give com	ningling order	r number:		
		. , .,						
NOTE: Complete Parts IV and V or	n reverse s	de if necessa	iry.					
			* '	11	011 0	CAICEDIATION DO US		
VI. CERTIFICATE OF COMPLIANCE				11	OIL CONSERVATION DIVISION			
						AUG 1 6 1985		
I hereby certify that the rules and regulations of	of the Oil Co	nservation Divi	sion have	APPR	OVED			19
been complied with and that the information given is true and complete to the best of					Editor San 12	⊙ Â		
my knowledge and belief.			Oil & telt staperier					
				11		Off On Walls of the		
				TITLE	·		<u>·</u> _	
, h								
Mena Meya Herndon			This form is to be filled in compliance with RULE 1104.					
1200					wat for allowable for a ne			
(Signature)	,		•			t be accompanied by a tab well in accordance with a		
Production Clerk				11				
(Title)				{I		this form must be filled o completed wells.	ut compiet	tely for allow-
July 1, 1985				1)		•		
						Sections I. II. III. and VI		
(Dair)				ll marrua	me or number	, or transporter, or other at	ica casage	, or couginour