## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION		1 1	
SANTA PE		7	
FILE		1 1	_
U.1.0 .1.		1 1	_
LAND OFFICE		1	_
THANSPORTER	OIL	1 1	
	GAS	1	_
OPERATOR		1	_
PROBATION DE	KX	1	_

Production Clerk

July 1, 1985

(Title)

(Date)

## 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

GIL			
TRANSPORTER	O ALLOWADI C		
OPERATOR AND			
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
I.	FORT OIL AND NATURAL GAS		
Operator			
Tipe Oil and Chaminal Company			
Fina Oil and Chemical Company			
Box 2990, Midland, TX 79702			
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:	Change of Company Name - 55 1 01 05		
Recompletion Ott Dr	Change of Company Name effective 7-01-85		
Change in Ownership Casinghead Gas Ca	Injection Well		
If change of ownership give name . American Petrofina Comp	any of Texas, Box 2990, Midland, TX 79702		
and secretar of previous owner	77702		
II. DESCRIPTION OF WELL AND LEASE			
Lease Name   Well No. Pool Name, Including F	ormation   Xind of Lease   Lease No.		
Horton Federal 29 Milnesand Sa			
Location . , milities and Sa	n Andres State, Federal 0145685		
H 1650 North	. 990 East		
Unit Letter H 1650 Feet From The North Lin	• andFeet From The		
29 7377715			
Line of Section 29 Township 8 Range	35 , NMPM. Roosevelt County		
	,		
<u>LI. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL</u>			
Name of Authorized Transporter of Off or Condensate Address (Give address to which approved copy of this form is to be sent)			
	. '		
Name of Authorized Transporter of Casinghedd Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)		
Unit Sec. Twp. Rge.	Is gas actually connected? When		
If well produces oil or liquids, cive location of tanks.			
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.			
	II		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
	AUC 1 6 100E		
been complied with and that the information given is true and complete to the best of my knowledge and belief.	BY Seay		
	TITLE CONTRACTOR		
Thera Telesulon Neva Herndon	This form is to be filed in compliance with RULE 1104.		
(Signature)	If this is a request for allowable for a newly drilled or despens:		
; (=+q:m:u/=/	Well, this form must be accompanied by a tabulation of the deviation		

tests taken on the well in accordance with AULE 111.

All sections of this form must be filled out completely for silowable 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