STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMEN	37 				5 Q 404	
ALLE CONCENTERING	OIL CONSERVATION DIVISION				Form C-104 Revised 10-01-78 Format 00-01-83 Page 1	
BANTA PE	P. O. BOX 2088					
ULAA.			MEXICO 87501	I		
	REQUEST FOR ALLOWABLE					
PRONATION OPPICIS	AUTHORIZATION TO	ANC FRANSPO		URAL GAS		
Operator						
Addention IlyCo Petrol	eum_Company					
P.O. Dox 12 Reason(s) for filing (Check proper box		N.N. 8	88260 Other (Pleas			
- Naw Voli	Change in Transporter of:		Uner (Piess	se explain)		
Recompietion	011	Dry	Gas			
Change in Ownership	Casinghead Gas		densate			
If change of ownership give name and address of previous owner $ \underline{W}$	iser Oil Company	P.0	. Eox 192	Sistersville.	W.Va.	26175
II. DESCRIPTION OF WELL AN	D LEASE Well No. Pool Name, Incl	wing Form	ration	Kind of Lease		}
State K		-			AL 1	Lease No.
Location	<u>3 Chavero</u>	o san	Andres		<u>State</u>	808809
Unit Letter <u>C</u> ; <u>66</u>	0Feet From TheN	Line a	and <u>1980</u>	Feet From The	W	
Line of Section 36 Tom	vaship 75 Ran	ige	<u> 33Е , ммрі</u>	M. Roo	sevelt	County
III. DESIGNATION OF TRANSI	PORTER OF OIL AND NAT	TURAL G	GAS			
Name of Authorized Transporter of CII	or Condensate	^	Address (Give address	to which approved copy o	f this form is so	be senij
Name of Authorized Transported of Cusinghead Gas 🔀 or Dry Gas			P.O. Box 900 Dallas, Texas 75221 Address (Give address to which approved copy of this form is to be sent)			
Cities S			P.O. Box 30	0 Rm 1052 CSE	Tulsa,	0k. 7410
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. F	33E	s gas actually connec Yes	10d7 When 5-6	6	
If this production is commingled with	th that from any other lease of	r pool, giv			×	
NOTE: Complete Parts IV and	V on reverse side if necessary	y.				
VI. CERTIFICATE OF COMPLIANCE			OIL C	CONSERVATION DI	VISION	
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	JAN 2 6 198	37	19
my knowledge and behef.			BYORIGINAL SIGNED BY JERRY SEXTON			
		•	TITLE	DISTRICT I SUPERVISO	R	
Connie Williard			This form is to be filed in compliance with RULE 1104. If this is a request for sllowable for a newly drilled or deepened			
(Signature) U Secretary			well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.			
(Tille) 1-20-87			All sections of this form must be filled out completely for allow- able on new and recompleted wells.			
(Date)			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.			

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Separate Forma C-104 .nust be filed for each pool in multiply completed wells.

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