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STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT	- Form C-104
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DISTRIBUTION	ATION DIVISION Format 06-01-83 Page 1
FILE P. O. BO	, -
	V MEXICO 87501
LAND OFFICE	
TRANSPORTER OIL REQUEST FOR ALLOWABLE	
AND	
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	
MURPHY OPERATING CORPORATION	
Address	
•	88201
Reason(s) for filing (Check proper box)	Other (Please explain)
New Welt Change in Transporter of:	CHANGE OF WELL NAME AND NUMBER
Recompletion Oil Da	y Gos EFFECTIVE January 1, 1986
Change in Ownership Casinghead Gas Ca	ondensate (formerly Kirkpatrick Federal #7)
f change of ownership give name and address of previous owner	·····
	TEMPORARILY ABANDONED
I. DESCRIPTION OF WELL AND LEASE	
BLUITT SAN ANDRES	RES ASSOCIATED State, Foderal or Foo FEDERAL NM- 041698-A
UNIT SECTION 14 9 BLUIII SAN AND	
The logo put put the South Lie	e and 660 Feet From The East
Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East	
Line of Section 14 Township 8 South Range 3	7 East , NMPM, ROOSEVELT County
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III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	. GAS Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Cil or Condensate	Agdiess (Give address to which approved copy of this form is to be sent)
Need Authorized Transporter of Casinghead Gas ar Dry Gas	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas or Dry Gas	
Unit Sec. Twp. Rge.	Is gas actually connected? When .
If well produces oil or liquids, give location of tanks.	
f this production is commingled with that from any other lease or pool,	give commingling order number:
	File committeel of the new office of the second s
NOTE: Complete Parts IV and V on reverse side if necessary.	
	OIL CONSERVATION DIVISION
VI. CERTIFICATE OF COMPLIANCE	FED 1 0 1086
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED FEB 1 8 1980 19
been complied with and that the information given is true and complete to the best of ny knowledge and belief.	BY ORIGINAL ANGNED BY JERBY SEXTEN
MURPHY OPERATING CORPORATION	DISTRICT I SUPERVISOR
	TITLE
	This form is to be filed in compliance with RULE 1104.
Lois M. Bregion	If this is a request for sllowable for a newly drilled or despend
Lois N. Brówn (Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.
Production Clerk	All sections of this form must be filled out completely for ellow-
(Tule)	able on new and recompleted wells.
February 13, 1986 (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.
104147	Separate Forms C-104 must be filed for each pool in multiply
Ĩ	completed wells.
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