

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

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

I.

Operator	Milford Oil Company		
Address	c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241		
Reason(s) for filing (Check proper box)	Other (Please explain)		
<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas	Change Lease Name & well No. From Federal "33" #1 to PAM #2 effective 7-1-87
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas		

If change of ownership give name and address of previous owner Tom L. Ingram, P. O. Box 1757, Roswell, NM 88201

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
PAM	2	East Allison SanAndres	State, Federal or Fee Federal	Above
Location				
Unit Letter	G	1980 Feet From The North Line and	1980 Feet From The East	
Line of Section	33	Township 8S	Range 37E	NMPM, Roosevelt County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Company	P. O. Box 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum Company	P. O. Box 1589, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When
	B   33   8S   37E   Yes   10-17-77

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.

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.

Wesley Wells  
(Signature)  
Agent  
(Title)  
7-8-87  
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 10 1987, 19\_\_\_\_\_  
BY \_\_\_\_\_  
TITLE ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

This form is to be filed in compliance with RULE 1104.

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 RULE 111.

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.

JUL 11 1987

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JUL 8 1987

QCD  
HOBBBS OFFICE