## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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|   | CONSERVA  | TION DIVISIO                          | ) N               | Form C-104<br>Revised 10-01-78<br>Format 06-01-83<br>Page 1 |
|---|---|---------------------------------------|-------------------|---|
| P. O. BOX 2088  |   |                                       | Page I            |   |
| FILE CANTA EE NEW MEXICO 87501  |   |                                       |                   |   |
| LAND OFFICE   |   |                                       |                   |   |
| TRANSPORTER OIL   |   |                                       |                   |   |
| REQUEST FOR ALLOWABLE   |   |                                       |                   |   |
| AND PROBATION OFFICE  |   |                                       |                   |   |
| AUTHORIZ  | ATION TO TRANSP   | PORT OIL AND NATU                     | RAL GAS           |   |
| 1.<br>Operator  |   |                                       |                   |   |
| Breck Operating Corp  |   | -                                     |                   |   |
| Address<br>P.O. Box 911, Breckenridge, Te   | xas 76024   |                                       |                   |   |
| Reoson(s) for filing (Check proper box)   |   | Other (Please                         | e explain)        |   |
| New Well Change in Transporter of:  |   |                                       |                   |   |
| Recompletion OII Dry Gas  |   |                                       |                   |   |
| X Change in Ownership Casinghead Gas Condensate   |   |                                       |                   |   |
| If change of ownership give name Union Texas<br>and address of previous owner   | Petroleum Con   | rp., P.O. Box 2                       | 120, Houston, Tex | tas 77252   |
| II. DESCRIPTION OF WELL AND LEASE   |   | · · · · · · · · · · · · · · · · · · · | Kind of Lease     | Lease No.   |
| Lease Name Well No. Pool Name, including Fo   |   |                                       |                   |   |
| Milnesand Unit 522 Milnesand-San Andres State, Federal LC062178   |   |                                       |                   |   |
| Location<br>Unit Letter <u>B</u> ; <u>90</u> Feet From The <u>North</u> Line and <u>1360</u> Feet From The <u>East</u><br>Line of Section 13 Township 8S Range 37E , NMPM, Roosevelt County |   |                                       |                   |   |
| Line of Section 13 Township 85  |   | / [ /                                 |                   |   |
| III. DESIGNATION OF TRANSPORTER OF OIL  | AND NATURAL   | GAS                                   |                   |   |
| Name of Authorized Transporter of Oil 🕅 or Condensate 🗌 Address (Give address to which approved copy of this form is to be sent)  |   |                                       |                   |   |
| Mobil Pipeline Company  | P.O. Box 900, Dallas, Texas 75221   |                                       |                   |   |
| Name of Authorized Transporter of Casinghead Gas 🕅  | Address (Give address to which approved copy of this form is to be sent)  |                                       |                   |   |
| Warren Petroleum Company  | P.O. Box 1589, Tulsa, Oklahoma 74102  |                                       |                   |   |
| If well produces oil or liquids, Unit Sec.  | Twp. Rge.   | is gas actually connect               | ed? When          |   |
| give location of tanks. H 13  | 8S 34E  | Yes                                   | 6-8-82            |   |
| If this production is commingled with that from any o   | other lease or pool,  | give commingling orde                 | r number:         | · · · · · · · · · · · · · · · · · · ·                       |
| NOTE: Complete Parts IV and V on reverse side   | e if necessary.   | 11                                    |                   |   |
| VI. CERTIFICATE OF COMPLIANCE   |   |                                       |                   |   |
| I hereby certify that the rules and regulations of the Oil Conse  | rvation Division have   | APPROVED                              | COCI - 1707       | , 19  |
| been complied with and that the information given is true and o<br>my knowledge and belief.   | BYORIGINAL SIGNED BY JERRY REXTON   |                                       |                   |   |
| TITLE DISTRICT I SUPERVISO  |   |                                       |                   | RVISOR  |
|   |   |                                       |                   |   |
| Elignbeth Smith (Signature) abeth 31  | This form is to be filed in compliance with RULE 1104.<br>If this is a request for allowable for a newly drilled or despend<br>well, this form must be accompanied by a tabulation of the deviation<br>tests taken on the well in accordance with RULE 111. |                                       |                   |   |
| - (Ture)  | All sections of this form must be filled out completely for allow-<br>able on new and recompleted wells.  |                                       |                   |   |

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(Dele) <del>1985</del> <del>31</del>;

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.

RECEVED Aller -NOV 5- 1985 C C D. HOBBS OFFICE