STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION	•	
SANTA PE		
FILE		
·U.8.0.8.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR	·	
PROBATION OFFICE		

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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

STRATA PRODUCTION	COMPANY				
648 PETROLEUM BLDG.	ROSWELL, N	M 88201		**************************************	·
Reoson(s) for filing (Check proper box)			Other (Please	explain)	
New Well	Change in Transporter o	ſ:			
Recompletion		Dry Gas			
Change in Ownership	Casinghead Gas	Condensate			
If change of ownership give name MOI and address of previous owner		PO DRAWER	I ARTES	SIA NM 88210	
II. DESCRIPTION OF WELL AND I	Well No. Pool Name, Ir	cludico Formation		Mind of Loope	
Lease Name	Well No. Pool Name, In	cinging retingtion		Kind of Lease	Lease No.
Gallina Federal	1 Tomab	awk San An	dres	Rigiz, Foderal XXXX	<u>NM-3648</u>
	Feet From The <u>SOU</u>	th_Line and <u>62</u> lange 32E	20 . NMPM.	_ Feet From The <u>West</u>	County
	<u>~~ 73 (</u>	JZE	, 11 M/F M/	Rooseven	County
III. DESIGNATION OF TRANSPOR	TER-OF-OIL-AND N	ATURAL GAS			
Name of Authorized Transporter of Oil			(Give address to	which approved copy of this form	n is to be sent)
Navaio Refining Compa	Effective 1-1	-93 P.O	. Drawer	159, Artesia, NM 8	8821 0
Name of Authorized Transporter of Casingi	nead Gas XX or Dry Ga	s Address	(Give address to	which approved copy of this form	n is to be sentj
Cities Service Oll & G	OXY NGL -		. Box 300	Tulsa, OK 7410	2
11			tually connected		
If well produces oil or liquids, give location of tanks.	M 31 7	32 Yes	·	3-08-84	
If this production is commingled with the	hat from any other lease	or pool, give com	mingling order	number:	

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

1 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.

(Signature)

VICE PRESIDENT

11-30-88

(Date)

(Tile)

	JAN 0 6 1989
BY	ORIGINAL SIGNED BY JERRY SEXTON
TITLE	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.