ENERGY AND MINERALS DEPARTM	•		Form C-104 Revised 10-01-78 Format 06-01-83
DISTRIBUTION	OIL CONSERVATION DI	VISION	Page 1
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PILE	SANTA FE, NEW MEXICO 8	87501	
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TRANSPORTER OIL			
OAS .	REQUEST FOR ALLOWABLE	E	
OPENATOR	AND		
PRONATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND	D NATURAL GAS	
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Operator	T		
SOBLE IN	TERNATIONAL LNC.		
Address		-	
P+ 4 + 11	PARTRIDGE PI KORSTOW	$\sim 1x - 78$	380
Reason(s) for filing (Check proper b	ox) Other	r (Please explain)	
New Well	Change in Transporter of:		
	Change in Transporter of.		
	Oil Dry Gas		
Recompletion			
			< 14 2700
Change in Ownership	Oil Dry Gas Casinghead Gas Condensate	Groop Phase	Suite 2700
Recompletion	Oil Dry Gas Casinghead Gas Condensate	GREER WAY PLZA	Suite 2700 Houston Tx 7704
Change in Ownership f change of ownership give name and address of previous owner	Mobil Production NR F Tr Tric 90	GREER WAY PHEA	Suite 2700 Houston Tx 7701
Recompletion Change in Ownership f change of ownership give name and address of previous owner	Mosic Production Nr & Tric 90	GREERWAY PLIZA	Suite 2700 Houstan Ta 7]04
Recompletion Change in Ownership f change of ownership give name and address of previous owner Leose Name	MOBIL POOL Name, Including Formation	Kind of Leose	Houstan Tx 7704
Recompletion Change in Ownership f change of ownership give name and address of previous owner	Mosic Production Nr & Tric 90	~	Houston Tx 7704
Recompletion Change in Ownership f change of ownership give name and address of previous owner Leose Name	MOBIL Production Nr. + Trac, 90 Well No. Pool Name, Including Formation LIGHTCAP DEUDNIAN	Kind of Lease State, Federal or Fee	Fee Loano No
Recompletion Change in Ownership f change of ownership give name address of previous owner I. DESCRIPTION OF WELL A Lease Name LIGHT CAP LAND Co. Location	MOBIL Production Nr. + Trac, 90 Well No. Pool Name, Including Formation LIGHTCAP DEUDNIAN	Kind of Leose	Fee Loano No
Recompletion Change in Ownership f change of awnership give name address of previous owner I. DESCRIPTION OF WELL A Lease Name LIGHTLAP LAND Co. Location	Dil Dry Gas Casinghead Gas Dry Gas Condensate MOGIL Production Nr & True 90 ND LEASE Well No. Pool Name, Including Formation I LIGHT CAP DEUDUAN 260 Feet From The South Line and 600	Kind of Lease State, Federal or Fee	Fee Loano No
Recompletion Change in Ownership f change of ownership give name address of previous owner	MOBIL Production Nr. + Trac, 90 Well No. Pool Name, Including Formation LIGHTCAP DEUDNIAN	Kind of Lease State, Federal or Fee	Fee Loano No
Recompletion Change in Ownership f change of awnership give name address of previous owner DESCRIPTION OF WELL A Lease Name L 1GHT CAP LAND Co Location Unit Letter	Dil Dry Gas Casinghead Gas Dry Gas Condensate MOBIL PRODUCING NARE TAL 90 ND LEASE Well No. Pool Name, Including Formation I LIGHTCAP DEUDNIAN DO Feet From The South Line and 600	Kind of Lease State, Federal or Fee DFeet From The EAS	Fee Loano No Fee
Recompletion Change in Ownership f change of ownership give name address of previous owner	Dil Casinghead Gas Casinghead Gas Condensate MOGIL Production NR F To Tac, 90 ND LEASE Well No. Pool Name, Including Formation LIGHTCAP DEUDNIAN POO Feet From The South Line and 600 Feet From The South Line and 600 Township 85 Range 30 E	Kind of Lease State, Federal or Fee EAS NMPM, CHAUES	Fee Loano No Fee Count
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NOTE: Complete Parts IV and V on reverse side if necessary. ----

VI. CERTIFICATE OF COMPLIANCE

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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.

P
(Signature) AUTHORIZED AGENT
5/19/ 87
(Date)

(DIL CONSERVATION DIV	JUN 5	1987
BY	Orig. Signed by Paul Kautz	,	
TITLE	Faul Kautz Geologist		

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.

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