

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

Form C-104  
Revised 10-01-78  
Format 06-01-83  
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U.S.O.B.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
REGISTRATION OFFICE			

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

30-005-00822

I. Operator

FI-ro Corporation

Address P O Box 8148 ROSWELL, N.M. 88202

Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> New Well	<input type="checkbox"/> Oil	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner HOMER J. KYLE, LOVINGTON, N.M.

II. DESCRIPTION OF WELL AND LEASE

Lease Name H GULF STATE H	Well No. 1	Pool Name, including Formation CAPROCK QUEEN	Kind of Lease State, Federal or Fee STATE	Lease No. B-8459
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Location	Unit Letter H	990 Feet From The East Line and 2310 Feet From The North
Line of Section 23	Township 13 S	Range 31E, NMPM, CHAVES County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

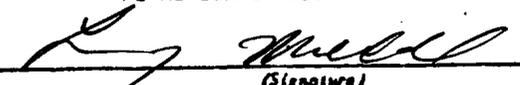
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
NAVAJO CRUDE OIL PURCHASERS	ARTESIA, N.M.
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rqs. Is gas actually connected? When

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.

FI-RO CORPORATION  
  
(Signature)  
TOMMY McDONALD, PRESIDENT  
(Title)  
3-1-90  
(Date)

OIL CONSERVATION DIVISION  
APPROVED MAR 16 1990  
BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
TITLE

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 deviatric 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 multiple completed wells.