

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.P.	
LAND OFFICE	
TRANSPORTATION	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 Quanico Oil & Gas, Inc.	
Address c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241	
Section(s) for filing (Check proper box)	
<input type="checkbox"/> New Well	Change in Transporter of:
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate
Other (Please explain) Effective 6/1/85	
If change of ownership give name and address of previous owner Gene Milford, Box 755, Hobbs, NM 88241	

II. DESCRIPTION OF WELL AND LEASE

NM-0346362

Lease Name Woodman Federal	Well No. 5	Pool Name, including Formation Cato San Andres	Kind of Lease State, Federal or Fee Federal	Lease No. above
Location Unit Letter <u>A</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>29</u> Township <u>8 S</u> Range <u>30 E</u> , NMPM, <u>Chaves</u> 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"/> The Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Cities Service Oil & Gas Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 300, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when
	F 28 8S 30E Yes 8/13/68

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.

Wanna Hall
(Signature)

Agent
(Title)

6/5/85
(Date)

OIL CONSERVATION DIVISION

APPROVED JUN 10 1985, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 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.

RECEIVED

JUN -5 1985

C.C.B.
HOBBS OFFICE