

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. 1 - OFFICE RECEIVED	
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LAND 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

I.

Operator MyCo Petroleum Company	
Address P.O. Box 1209 Lovington, N.M. 88260	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner **Wiser Oil Company P.O. Box 192 Sistersville, W.Va. 26175**

II. DESCRIPTION OF WELL AND LEASE

Lease Name State I	Well No. 4	Pool Name, including Formation Chaveroo San Andres	Kind of Lease State, Federal or Fee	State State	Lease No. 800002
Location Unit Letter L : 660 Feet From The W Line and 1980 Feet From The S					
Line of Section 4 Township 8S Range 33E , NMPL, 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"/> Mobil Pipeline	Address (Give address to which approved copy of this form is to be sent) P.O. Box 900 Dallas, Texas 75221	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> City Cities Service	Address (Give address to which approved copy of this form is to be sent) P.O. Box 300 Rm 1052 CSB Tulsa, Ok. 74102	
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 4
	Twp. 8S	Rge. 33E
Is gas actually connected? Yes		When 10-65

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.

Connie Willard
(Signature)

Secretary

(Title)
1-20-87

(Date)

OIL CONSERVATION DIVISION

APPROVED **JAN 26 1987**, 19

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 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
JAN 23 1987
OCD
HOBBS OFFICE