

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

Form C-104  
Revised 10-01-78  
Format 06-01-83  
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
PRORATION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator KELT OIL & GAS INC.

Address P.O. BOX 1493 ROSWELL NEW MEXICO 88201

Reason(s) for filing (Check proper box) Other (Please explain)

<input type="checkbox"/> New Well	Change in Transporter of:	<u>Effective 5 AUG 88</u>
<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	

If change of ownership give name and address of previous owner AMOCO PRODUCTION COMPANY P.O. BOX 68 HOBBS NM, 88240

II. DESCRIPTION OF WELL AND LEASE INJECTOR

Lease Name <u>STATE DQ</u>	Well No. <u>3</u>	Pool Name, including Formation <u>Many Gates Wolfcamp</u>	Kind of Lease State, Federal or Fee State	Lease No. <u>K-5606</u>
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Location

Unit Letter G ; 2305 Feet From The North Line and 2290 Feet From The East

Line of Section 32 Township 9 South Range 30 East , 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"/> <u>Western Oil Transporters None - Svd</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1183 Houston, TX 77001</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Pecos River Gas Plant, LTD c/o Liquid Energy</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 4000 The Woodlands, TX 77380</u>

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	<u>C</u>	<u>32</u>	<u>9S</u>	<u>30E</u>	<u>no</u>	

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.

Andrew Z. Probst  
(Signature)

Petroleum Engineer

(Title)

14 AUG 88

(Date)

OIL CONSERVATION DIVISION

APPROVED SEPT 11 1988, 19

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 deviate 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.