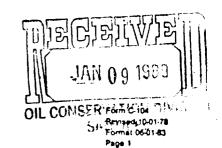
STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE		1	
FILE			
U.S.G.A.			
LAND OFFICE			
TRANSPORTER	OIL		
	BAB		
OPERATOR			
PROPATION OFFICE			

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



REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	PURT OIL AND NATURAL GAS			
Carr Well Service, Inc.				
P.O. Box 69090. Odessa, Texas 79769-9090				
Reason(s) for filing (Check proper box)	Other (Picase explain)			
New Well Change in Transporter of:				
Recompletion OII Do	ry Cas			
X Change in Ownership Casinghead Gas C	ond enacte			
If change of ownership give name Skelton Oil Co., P.O. I and address of previous owner	Box 176, Hobbs, N.M.88241-0176			
II. DESCRIPTION OF WELL AND LEASE				
Lease Name Well No. Pool Name, Including F	ormation Kind of Lease Lease No.			
Kendrick	camp State, Federal or Fee FEE			
Location				
Unit Letter + : 1980 Feet From The South Line and 660 Feet From The East				
Line of Section 6 Township 12S Range	38E NMPM. Lea County			
Cire of Section 5 (50) this 120 Indige	SOE NMPM, Led County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS TA			
Name of Authorized Transporter of Off or Condensate	Address (Give address to which approved copy of this form is to be sent)			
·				
Name of Authorized Transporter of Castnighed Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)			
If well produces oil or liquids, Unit , Sec. Twp. Res. give location of tanks.	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 OIL CONSERVATION DIVISION				
I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED JAN 1 2 1989				
been complied with and that the information given is true and complete to the best of my knowledge and belief.	Orig. Signed by			
	Paul Kaut-			
1	TITLE Geologist			
This form is to be filed in compliance with RULE 1				
(Signature)	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.			
(Tille)	All sections of this form must be filled out completely for allowable on new and recompleted walls.			
12/30/88	Fill out only Sections I. II. III. and VI for changes of owner.			
(Date) well name or number, or transporter or other such of Separate Forms C-104 must be filled for ea				
er og grenne er	completed wells.			