Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Antesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Dwight Tipton, et al Address c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241 Reason(s) for Filing (Check proper box) New Well Change in Transporter of: Recompletion Oil Dry Dry Gas Effective 4/1/89 Change in Operator Greek proper box Casinghead Gas Condensate If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation State, Predestator Feet NM6989 Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West Section 23 Township 14S Range 34E , NMPM, Lea Co. III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil XX or Condensate Address (Give address to which approved copy of this form is to be sent) PERMIAN Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183, Houston, TX 77251-1183 Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent) P.O. Box 1189, Tulsa, OK 74102 If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When 7 yes location of tanks. M 23 1145 34E Yes 10/3/63 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA	Operator		IO TRA	ANSP	ORT O	L AND NATURAL G					
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.