STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

1440		
DISTRIBUTION		
SANTA FE		
FILE		
u.1.0.4.u		
LANG OFFICE		
01		
GAS		
OPERATOR		
PROBATION OFFICE		
	OIL GAS	OIL GAS

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

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE

OPERATOR	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
PROBATION OFFICE	AUTHORIZATION TO TRANSPO	URI UIL AND NATU	KAL UAS			
I						
Phillips Petroleum Comp	oany					
Address		•			1	
4001 Penbrook, Odessa,	Texas 79762				,	
Reason(s) for liling (Check proper box)		Other (Please	explain)			
New Well	Change in Transporter of:	1			:	
Recompletion	OII Dry	Gas		•		
Change in Ownership	Casinghead Gas Con	ndensate				
			·			
If change of ownership give name and address of previous owner						
•		•				
II. DESCRIPTION OF WELL AND I	EASE Well No. Pool Name, Including For	- mail (0.0)	Kind of Lease		Lease No.	
Lease Name	1 1		State, Federal or Fee	State	E-906	
Ranger	16 Ranger Lake F	enn	<u> </u>	State	1	
Location	• .	1000		West		
Unit Letter K : 1980	Feet From TheSouth_Line	and 1980	Feet From The	MESC		
			. Lea		County	
Line of Section 26 Towns	hip 12-S Range 3 ²	4-E , NMPN	, Lea			
III. DESIGNATION OF TRANSPO	RTER OF OIL AND NATURAL	Andreas (Give address	tal National B	of this form is	to be sent/	
Name of Authorized Transporter of OII X	or Condensate	"2300'Continer	ital National B	sank Blog,		
Amoco Pipe Line Compan	head Gas (X) or Dry Gas	Address (Give address	to which approved copy	of this form is	to be sent;	
Name of Authorized Transporter of Casing		1	. Odessa. Texa			
Phillips 66 Natural Ga		is gas actually connec	od? When	15		
If well produces oil or liquids,			10/06	5/87	•	
give location of tanks.	N : 23 12-S: 34-E	l Yes ·				
If this production is commingled with	that from any other lease or pool,	give commingling orde	er number		·	
NOTE: Complete Parts IV and V	The reverse since if meeting.	11				
VI. CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION				
			NCT 2 6 1987	7	. 19	
I hereby certify that the rules and regulations	of the Oil Conservation Division have	APPROVED	UU I W I I I I		, ,,,	
been complied with and that the information my knowledge and belief.	given is true and complete to the but of	BY	PIGINAL SIGNED B	Y JERRY SEX	TON.	
my knowledge 21d benet.		DISTRICT I SUPERVISOR				
		TITLE				
- 11		This form is	o be filed in complia	ince with AUL	E 1104.	
Tight leady		If this is a re-	quest for allowable for	or a newly dril	led or despense	
(Signatu	·*/	well, this form mu	at be accompanied by	with MULE 1	of the deviation	
Production Records	Supervisor	tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-				
(Title)		able on new and r	ecompleted wells.			
October 22	Fill out only	Sections I. II. III.	and VI for ch	anges of owner.		
(Date)		well name or numb	er, or transporter, or o	INST BUCK CAME	iffe of countricum	

(Dete)