

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

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  
**GREENHILL PETROLEUM CORPORATION**

Address  
**16010 Barker's Point Lane, Suite 325, Houston, TX 77079**

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

☐ New Well      Change in Transporter of:      ☐ Oil      ☐ Dry Gas      **Effective 1/1/89**

☐ Recompletion      ☐ Casinghead Gas      ☐ Condensate

☒ Change in Ownership

If change of ownership give name and address of previous owner **Texaco Producing, Inc., P. O. Box 728, Hobbs, NM 88240**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Lovington Paddock Unit</b>	Well No. <b>37</b>	Pool Name, including Formation <b>Lovington Paddock</b>	Kind of Lease State, Federal or Fee      State	Lease No. <b>B-1505</b>
Location				
Unit Letter <b>N</b> : <b>330</b> Feet From The <b>South</b> Line and <b>2290</b> Feet From The <b>West</b>				
Line of Section <b>31</b> Township <b>16S</b> Range <b>37E</b> , NMPM,      Lea      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"/> <b>Texas New Mexico Pipeline Company (0095-0512)</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 2528, Hobbs, NM 88240</b>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>Phillips 66 Natural Gas Company GPM Gas Corporation</b>	Address (Give address to which approved copy of this form is to be sent) <b>001 Penbrook, Odessa, TX 79762</b>
If well produces oil or liquids, give location of tanks.	Is gas actually connected?      When
Unit <b>B</b> Sec. <b>1</b> Twp. <b>17S</b> Rge. <b>36E</b>	<b>Yes</b> <b>N.A.</b>

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.

 **Gene Linton**  
(Signature)  
**Production Coordinator**  
(Title)  
**December 28, 1988**  
(Date)

(713) 870-0606

OIL CONSERVATION DIVISION  
**JAN 18 1989**  
APPROVED \_\_\_\_\_  
BY **ORIGINAL SIGNED BY JERRY SEXTON**  
**DISTRICT 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 deepens well, this form must be accompanied by a tabulation of the deviated 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.

JAN 2 1989

RECEIVED  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, D.C. 20535

RECEIVED

JAN 4 1989

OCU  
HUBBS OFFICE