

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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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  
Bonner Plumbing Inc.

Address  
Rt. 4 Box 866 Lubbock, Texas 79424

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain) <u>To change operator name to Bonner Plumbing Inc.</u>
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner Mobil Producing Texas - New Mexico Inc.

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>New Mexico I</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Permian upper Penn Townsend-Holcomb</u>	Kind of Lease State, Federal or Fee <u>State</u>	Lease No. <u>43003</u>
Location Unit Letter <u>I</u> ; <u>660</u> Feet From The <u>West</u> Line and <u>3618</u> Feet From The <u>North</u> Line of Section <u>2</u> Township <u>16-S</u> Range <u>35E</u> , NMPM, <u>Lea</u> 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>Mobil Producing Texas New Mexico</u>	Address (Give address to which approved copy of this form is to be sent) <u>Houston 9 Greenway Plaza Suite 2700 Tx. 77046</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Warren Petroleum Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>Box 966 Lovington N.M. 88260</u>
If well produces oil or liquids, give location of tanks.	Unit <u>S/14</u> Sec. <u>2</u> Twp. <u>16-S</u> Rge. <u>35E</u> Is gas actually connected? <u>yes</u> 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

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.

David A. Bonner  
(Signature)

President  
(Title)

5-23-88  
(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_

BY \_\_\_\_\_

TITLE \_\_\_\_\_

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 deviation 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.