

STATE OF NEW MEXICO  
DEPARTMENT OF ENERGY AND MINERALS

AS OF DATE RECEIVED	
DISTRIBUTION	
DATE	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
REGULATION OFFICE	

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

Form C-104  
Revised 10/01/78  
Format OG-61-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator  
**Russell Traxell**

Address  
**c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241**

Change in Ownership (check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recombination	<input type="checkbox"/> Oil	Effective 4/1/85
<input checked="" 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 **Tenneco Oil Co., 7990 I.H. 10 West, San Antonio, Texas 78230**

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Mesa Queen Unit</b>	Well No. <b>15</b>	Pool Name, including Formation <b>Mesa Queen Associated</b>	Kind of Lease State, Federal or Free State	Lease <b>E-641</b>
Location Unit Letter <b>K</b> <b>2310</b> Feet From The <b>South</b> Line and <b>1650</b> Feet From The <b>West</b> Line of Section <b>16</b> Township <b>16 S</b> Range <b>32 E</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>Navajo Refining Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>P. O. Box 159, Artesia, New Mexico 88210</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>None - Gas TSTM</b>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit <b>L</b> Sec. <b>16</b> Twp. <b>16S</b> Rge. <b>32E</b>	Is gas actually connected? <b>No</b> 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.

IV. 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.

*Russell Traxell*  
(Signature)

Agent

(Title)

5/14/85

(Date)

OIL CONSERVATION DIVISION

APPROVED *[Signature]*, 19

BY **ORIGINAL SIGNED BY JERRY SEXTON**

**DISTRICT I 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 deeper well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for all wells on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions.

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

RECEIVED

MAY 14 1961

U.S. DEPT. OF JUSTICE  
HOBBS ST. 100