

STATE OF NEW MEXICO
OIL AND GAS MATERIALS DEPARTMENT

RECEIVED	
DIVISION	
SANTA FE	
FILE	
U.S. O. & G.	
LEASE OFFICE	
TRANSPORTER	OIL
OPERATOR	GAS
REGISTRATION OFFICE	

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

Form C 104
Revised 10-01-78
Format OG-6183
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Russell Trall

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

<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership		Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gashead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	Other (If lease explain) Effective 4/1/85
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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 Mesa Queen Unit	Well No. 23	Pool Name, including Formation Mesa Queen Associated	Kind of Lease State, Federal or Free State	Lease No. E-627
Location Unit Letter C 330 Feet From The North Line and 1650 Feet From The West Line of Section 20 Township 16 S Range 32 E N.M.P.M. Lea Coun				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Artesia, New Mexico 88210
Name of Authorized Transporter of Gashead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None - Gas TSTM	Address (Give address to which approved copy of this form is to be sent)
Well produces oil or liquids, <input type="checkbox"/> or gas only <input checked="" type="checkbox"/> Location of tanks: Unit L Sec. 16 Twp. 16S Rge. 32E	Is gas actually connected? <input type="checkbox"/> No <input checked="" type="checkbox"/> 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 read and understood and that the information given is true and complete to the best of my knowledge and belief.

[Signature]
(Signature)
Agent
(Title)
5/14/85
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____
BY **ORIGINAL SIGNED BY JERRY SEXTON**
TITLE **DISTRICT 1 SUPERVISOR**

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.