STATE OF NEW MEXICO

(Date)

ENERGY AND MINERALS DEPARTMENT

PO. 80 100HD 141	****	
DISTRIBUTION		
SANTA PE		
PILE		
U.S.G.A.		
LAND OFFICE		
TRAMSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION 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

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

REQUEST FOR ALLOWABLE

PROBATION SPPICE	AUTHORIZATION TO TRANSF	ND PORT OIL AND NATU	RAL GAS	
	ADTHORIZATION TO TRIVE			
Operator	aina Co			
Michaelson Produc	ring co.			
P. O. Drawer 2456	6, Midland, TX 79	702		i
Rossen(s) for filing (Check proper box)		Other (Piease	e explain)	
Now Well	Change in Transporter of:			
Recompletion		ry Gas		1
Change in Ownership	Castnehead Gas C	ondensate		
Il change of ownership give name and address of previous owner			•	
II. DESCRIPTION OF WELL AND L	EASE Well No. Pool Name, including F	ormation	Kind of Lease	Lease No.
Burson	1 Garrett Dr		State, Federal or Fee Fee	
Location Unit Letter C . 1900	Feet From The_WestLin	ne cand467	Feet From The North	·
t tag of Section 28 Townsh	un 16S Range 3	38E , NMPN	. Lea	County
Line of Section 28 Townsh	ith and a state of the state of			السني بيسي
III. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL	L GAS		
Name of Authorized Transporter of Oil	or Condensate	Aspress (Live dagress	which approved copy of this form is P. O. BOX	/02068 _]
Amoco Pipeline-Inte		ng Ull Tender	mounter appropried copy of this form is	74170-206
Name of Authorized Transporter of Casings Phillips 66 Natu	ral Gas Company	Bartlesvi	11e, OK 74004	
If well produces oil or liquids, Que location of tanks.	C 28 16S 38E	yes	1974	
If this production is commingled with the	hat from any other lease or pool,	give commingling orde	er number:	
a .1. n . m217 -				
VI. CERTIFICATE OF COMPLIANCE	E		MAR 1 3 1990	
I hereby certify that the rules and regulations	of the Oil Conservation Division have	APPROVED	ORIGINAL SIGNIES	, 19
been complied with and that the information given is true and complete to the best of my knowledge and belief.		BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		
•		TITLE	=101KIC1 301EKV120)	ŧ
		1	about the day of the second se	
SHI Makeel-		This form is tobsefiled in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepened		
(Signature)/	well, this form mustibe accompanied by a tabulation of the deviation		
Agent		tests taken on the wdl in accordance with RULE 111. All sections of this form must be filled out completely for allow-		
(Title)		All sections of this form must be filled out completely for allowable on new and recompleted wells.		
March 7, 1990		Fill out only Sentions I. II. III. and VI for changes of owner, well name or number, or transporten or other such change of condition.		
(Date)		II MAY DEULA OF VITTING		· #

MAR 12 1990 MOBBS OFFICE