STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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人名英格兰克德德斯特

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DISTRIBUTION		Г	1
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE		_	_
TRANSPORTER	DIL		
	GAS		
OPERATOR		7	
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 C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE

OPERATOR	ND :		
AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
1. Operator			
Carr Well Service, Inc.			
	707(0		
P.O. Box 69090, Odessa, Te			
New Well Change in Transporter of:	Other (Please explain)		
	ry Gas		
	ondensate		
If change of ownership give name Allen K. Trobaugh, 4305 N. Garfield, Ste 233, Midland, Tx and address of previous owner Allen K. Trobaugh, 4305 N. Garfield, Ste 233, Midland, Tx			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, Including Fo	ormation Kind of Lease Fee & Lease No.		
Eidson Com 1 Shoebar A			
Location	11.01E.11.01		
Unit Letter G: 1980 Feet From The North Lin	e and 1980 Feet From The East		
	-		
Line of Section 28 Township 16S Range 3	5E , NMPM, Lea County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL			
Name of Authorized Transporter of Oil or Condensate (Give address to which approved copy of this form is to be sent)			
The Permian Gorporation Box 1183 Houston Ty 77001 Name of Authorized Transporter of Casinghead Gas or Dry Gas 🖄 Address (Give address to which approved topy of this form is to be sent)			
70-2000	Box 3179, Midland, Texas 79702		
If well produces oil or liquids, Unit Sec. Twp. Rgs. give location of tanks.	Yes When 6/20/80		
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.			
	OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation Division have APPROVED UEC 1 4 1988			
been complied with and that the information given is true and complete to the best of			
y knowledge and belief. BY SEXTON			
77	TIPLE DISTRICT I SUPERVISOR		
This form is to be filed in compliance with MULE 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 deviation			
Agent	tests taken on the well in accordance with RULE 111.		
(Title) All sections of this form must be filled out completely for all able on new and recompleted wells.			
December 7, 1988 Fill out only Sections I, II, III, and VI for changes of o well name or number, or transporter, or other such change of cond			

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