## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTI	O#	
BANTA PE		
FILE		
U.S.G.A.		
LAND OFFICE		
TRANSPORTER	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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

AUTHORIZATION TO TRANSI	PORT OIL AND NATURAL GAS			
Operator OVV LICA The				
OXY USA Inc.	·	<del></del>		
P. O. Box 50250, Midland, TX 79710				
Reason(s) for filing (Check proper box)	Other (Please explain)			
New Well Change in Transporter of:	Change in Transporter of: Change of operator's name			
	y Gas			
	effective April 1,	1988		
A Change in Country				
f change of ownership give name cities Service Oil & Gas and address of previous owner Cities Service Oil & Gas	Corp., P. O. Box 50250, Mi	dland, TX 79710		
I. DESCRIPTION OF WELL AND LEASE	ormation   Kind of Lease	Legse No.		
Leader Maine				
State CD 1 Maljamar G-S	State, rederat or	State B-5310		
Location	•			
Unit Letter K : 2310 Feet From The South Lin	and 2310 Feet From The	West		
Line of Section 32 Township 17S Range	33E , NMPM, Lea	County		
Texas—New Mexico Pipeline Company  Name of Authorized Transporter of Casinghead Gas or Dry Gas  Phillips Patroleum Company of Matt Jas  If well produces oil or liquids, give location of tanks.  K 32 175 33E	P. O. Box 1510 - Midland Address (Give address to which approved Phillips Building - Midland Is gas actually connected? , when Yes			
f 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.				
TO COMPLIANCE	OIL CONSERVATIO	N DIVISION		
/I. CERTIFICATE OF COMPLIANCE				
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED APP	<u> % 6 1988 </u>		
een complied with and that the information given is true and complete to the best of				
ny knowledge and belief.	BY ORIGINAL SHOULD	DV Isaa		
	ORIGINAL SIGNED BY JERRY SEXTON TITLE DISTRICT   SUPERVISOR			
	III LEREINLI-I-S	UPSKVISOR		
2. d. Vatrano	This form is to be filed in com	-		
Signature/F. A. Vitrano	If this is a request for allowable well, this form must be accompanied tests taken on the well in accordance.	i by a tabulation of the deviation		
strict Operations Manager - Production (Tile)		e filled out completely for allow		
arch 15, 1988 (Date)	Fill out only Sections I. II. II well name or number, or transporter.	I, and VI for changes of owner		
(5=14)	Separate Forms C-104 must be	filed for each pool in multiply		
• •	completed wells.			

The Marks Office