STATE OF NEW MEXICO

(Date)

	11710	Ţ	
DISTRIBUTE			
SANTA PE			
FILE			
U.8.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

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

REQUEST FOR ALLOWABLE

DPERATOR	,	AND		
PROBATION OFFICE	AUTHORIZATION TO TRANS	SPORT OIL AND NATUR	AL GAS	
I.				
Operator				
OXY USA Inc.				
Address				
P. O. Box 50250	. Midland. TX 79710			
	, Fildland, 12 79710	Other (Please	explain i	
Reason(s) for filing (Check proper box)	6			
New Well	Change in Transporter of:	Change of operator's name		
Recompletion		effective April 1, 1988		
X Change in Ownership	Casinghead Gas	Condensate	19111 1, 1900	
	ies Service Oil & Gas	Corp., P. O. Box	50250, Midland, T	<u>x 79710</u>
II. DESCRIPTION OF WELL AND L	Well No. Pool Name, Including	Formation	Kind of Lease	Lease No
Lease Name			State, 冲海其种如果文字文字	B-5310
Cockburn A. State	4 Corbin Abo			- 1 <u>D-2310</u>
Location		•		
Unit Letter B : 990	Feet From The North Li	ne and <u>1980</u>	Feet From The <u>East</u>	
Line of Section 32 Townshi	ip 17S Range	33E , NMPM,	lea	County
III. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURA	L GAS		
Name of Authorized Transporter of Oil X	or Congensate	Agress (Give address to which approved copy of this form is to be sent)		
Texas-New Mexico Pipeline		Box 2528 - Hobbs, New Mexico 88240		
TEXAS - NEW TIEX TOO TOO THE	lege Gas V or Dry Gas	Address (Give address to	which approved copy of this fo	orm is to be sent)
Name of Authorize GPM 188 Corporat	LEFE	CTIVE: February 1, 1	992 S. New Mexico 382	40
Phillips Petroleum Compa	1,000	Is gas actually connected		
If well produces oil or liquids,			i	
give location of tanks.	<u> 32 </u>			
If this production is commingled with th	ist from any other lesse or pool	, give commingling order	number:	
NOTE: Complete Parts IV and V on	i reverse side if necessary.			
		OIL CO	INSERVATION DIVISIO	N
VI. CERTIFICATE OF COMPLIANCE	C .			
I hereby certify that the rules and regulations of	of the Oil Conservation Division have	APPROVED	APP 2 K 10 KD	, 19
been complied with and that the information gr	ven is true and complete to the best of		Orig. Signed by	
my knowledge and belief.		BY	Poul Kautz	
,		<u> </u>	Geologist	
		TITLE		
0/1/		This form is to !	e filed in compliance with	1 RULE 1104.
f. l. Mono			at for allowable for a newi	
Signature.	F. A. Vitrano	well, this form must	be accompanied by a tabula	ation of the deviati
		tests taken on the w	ell in accordance with AU	LE 111.
istrict Operations Manager	- Production	All sections of t	his form must be filled out	completely for allo
(Title)		able on new and reco	empieted wells.	
arch 15, 1988		Fill out only Se	ctions I, II. III. and VI fo	or changes of owns
(Date)		well name or number,	or transporter, or other such	resenta di congitic