## STATE OF NEW MEXICO

CHORRY AND MINERALS DEPARTMENT

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DISTRIBUTION			Γ
SANIA FE		Ţ	
FILE			
U.8.0.5,			
LAND OFFICE			
TRAKSPORTER	OIL		
	GAB		
DPLHAYOR			
PACKATION 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

1.	<del></del>					
Operator						
Shirey & Steinberg		<u>-</u>				
Accies.						
C/O Oil Reports & Gas Servi	ces. Inc. P. O. Box	755, Hobbs, NN				
	Change in Trensporter of:	Other (Freez	e explain)			
Recompletion		y Gas Effect	1 2/1/95			
VY Change in Ownership		ondensate Ellecti	Lve 3/1/85			
		L		<del></del>		
If change of ownership give name	Dver Sr. P. O. Bo	v 755 Hobbe N	JM 88241			
and address of previous owner J. W. Dyer, Sr., P. O. Box 755, Hobbs, NM 88241						
II. DESCRIPTION OF WELL AND LEASE  LC-032233A						
Lease Name	Well No. Pool Name, Including Fo	ormation	Kind of Lease	Lease No.		
Bowers A Federal	4 Hobbs Ogallal	а	State, Federal or Fee Federal	Above		
Location						
Unit Letter J : 1897.5	Feet From The South Lin	e and <u>2062,5</u>	Feet From The East			
		22-				
Line of Section 30 Township	18S Range	38E , NMPM	<u> </u>	Lea County		
III. DECICALATION OF TRANSPORTER OF OU AND MATURAL CAS						
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS    Name of Authorized Transporter of Cit						
Shell Pipeline Corporation P. O. Box 1509, Midland, TX 79704						
hame of Authorized Transporter of Casinghea	d Gas or Dry Gas		to which approved copy of this form i	to be sent)		
None						
If well produces oil or liquids,	Sec. Twp. Rge.	Is gas actually connect	ed? When	<del></del>		
give location of tanks.	1 30   185   38E	No				
If this production is commingled with that from any other lesse or pool, give commingling order number:						
•						
NOTE: Complete Parts IV and V on r	everse side if necessary.	11				
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION						
MAD 1 0 100r						
have a walled such and that the information gives it true and complete to the heat of						
my knowledge and belief.		ORIGINAL SIGNED BY ICLEY SEXTON				
			DISTRICT I SUPERVISOR			
		TITLE		<del></del>		
/2		This form is to be filed in compliance with RULE 1104.				
(Signature)		If this is a request for allowable for a newly drilled or deepened				
tests taken on the well in accordance with aut # 111				of the deviation		
Agent (Tule) All sections of this form must be filled out completely for			letely for allow-			
3/13/85						
(Date)		Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.				

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