

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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| LAND OFFICE            |     |  |
| TRANSPORTER            | OIL |  |
|                        | GAS |  |
| OPERATOR               |     |  |
| PRODUCTION 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

I. Operator PSA Producers

Address c/o Oil Reports & Gas Services, Inc., P.O. Box 755, Hobbs, New Mexico 88241

Reason(s) for filing (Check proper box)

|   |   |                          |
|---|---|--------------------------|
| <input type="checkbox"/> New Well                       | Change in Transporter of:   | <u>Effective 12/1/86</u> |
| <input type="checkbox"/> Recompletion                   | <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas               |                          |
| <input checked="" type="checkbox"/> Change in Ownership | <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate |                          |

Other (Please explain)

If change of ownership give name and address of previous owner Conoco, Inc., Box 460, Hobbs, New Mexico 88240

II. DESCRIPTION OF WELL AND LEASE

|   |          |                                |                                    |                |
|---|----------|--------------------------------|------------------------------------|----------------|
| Lease Name  | Well No. | Pool Name, including Formation | Kind of Lease                      | Lease No.      |
| <u>East EK Unit</u>   | <u>8</u> | <u>East EK Queen</u>           | <u>State, Federal or Fee State</u> | <u>OG-1633</u> |
| Location  |          |                                |                                    |                |
| <u>Unit Letter H</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> |          |                                |                                    |                |
| <u>Line of Section 22</u> Township <u>18S</u> Range <u>34E</u> , NMPM, <u>Lea</u> County                    |          |                                |                                    |                |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|  |  |
|--|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| <u>Conoco, Inc.</u>  | <u>P.O. Box 1267, Ponca City, OK 74603</u>                               |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>    | Address (Give address to which approved copy of this form is to be sent) |
|  |  |
| If well produces oil or liquids, give location of tanks.   | Unit Sec. Twp. Rge. Is gas actually connected? When                      |
|  | <u>K 22 18S 34E</u>  |

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.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

*Donna Walker*  
(Signature)  
Agent  
(Title)  
4/13/87  
(Date)

OIL CONSERVATION DIVISION

APPROVED APR 15 1987 , 19 \_\_\_\_\_  
BY \_\_\_\_\_  
ORIGINAL SIGNED BY JERRY SEXTON  
TITLE DISTRICT SUPERVISOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable (for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

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.