STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPONTER	OIL		
	GAS		
OPENATON			
PRONATION OFFICE			

I.

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

Operator								
Premier Production Company								
Address								
P. O. box 1246,	Artesia	, NM 882	210					
Reason(s) for filing (Check proper boz)			Oihes (Please explain)					
New Well		Transporter o	\sim					
Recompletion			~~	y Gan				
X Change in Ownership	Casir	ghead Gas		ndensate	[·
If change of ownership give name								
and address of previous owner	Penroc (Dil Cori	porati	on			· · · · · · · · · · · · · · · · · · ·	
W DROODWINGSLOF WITH ANT	TEACE			•				
II. DESCRIPTION OF WELL AND	Well No.	Pool Name, In	actuding Fr	ormation		Kind of Lease		Lease No.
Bondurant Federal		Buffa		~		State, Federal or Fee	fodoral	NM 1256
Bongurant Fegeral Gre		RULLA	LO/ PEL		<u></u>		TEGELAI	
-			uth .		660		Pact	
Unit Letter I : 19	700 Feel Fro	n The 300	<u>u u u u</u> u un	• and	000	Feet from the	<u> </u>	
Line of Section 1 Tow	nship 19	S F	Range 3	32E	, NMPM	. Lea		County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS								
Name of Authorized Transporter of Oil 🔯 or Condensate 🗌 Address (Give address to which approved copy of this form is to be sent)								
Koch Oil Company of Texas Box 1558, Breckenridge, TX 76024								
Nano of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)								
Phillips 66 Natural	Gas					ok, Odessa,	TX 79762	
If well produces oil or liquids,	Unit Sec.	Twp.	Rge.	ls gas ac	tually connect	od? When		
give location of tanks.	l l			<u> </u>	<u>yes</u>	12/	<u>15/83 </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.

Lawy Jonia
(Signature) ODDASCOG
1/10/88
(Date) 505-748-2446

0	IL CONSERVATION DIVISIO	N	
APPROVED	JAN 1 4 1988		
BYORIGINAL SIGNED BY JERRY SEXTON			
TITLE	Planter		

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

If this is a request for allowable for a newly drilled or deepends 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.

