

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATION	
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

Operator: Alpha Twenty-One Production Company

Address: P.O. Box 1206, Jal, NM 86252

Reason(s) for filing (Check proper box)		Oil ☒ Gas	
☐ New Well	☐ Change in Transporter of	Casinghead Gas MUST NOT BE FLARED AFTER <u>7/1/85</u> UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.	
☐ Recompletion	☐ Oil		
☐ Change in Ownership	☐ Casinghead Gas		
	☐ Dry Gas		
	☐ Condensate		

Change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE.

DESCRIPTION OF WELL AND LEASE		Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Well Name	Mike	4	Burice Monument	State, Federal or Fee Fee	
Location			Grubbs San Andres		
Unit Letter	G	2530	Feet From The North	1380	Feet From The East
Line of Section	32	Township	18-S	Range	37-E
				NMPM	Lea
					County

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)
Navajo Refining Company	P.O. Drawer 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Barren Petroleum Company	P.O. Box 1689, Lovington, NM 88260
Well produces oil or liquids, give location of tanks.	Unit Sec. wp. Rge. Is gas actually connected? When
G 32 185 37E	No

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.

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.

[Signature]
W. Mansford (Signature)
Vice President/Energy Resources

May 1, 1985 (Date)

OIL CONSERVATION DIVISION

APPROVED MAY 9 1985
BY Eddie W. Seay
TITLE Oil & Gas Inspector

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.

TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Well Name, Test-MCF/D	Length of Test	Est. Condensate/MMCF	Gravity of Condensate
Well Name, Spill, Jack pt.	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

100-443887-100