

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
OXY USA Inc.  
Address  
P. O. Box 50250, Midland, TX 79710  
Reason(s) for filing (Check proper box)  
☐ New Well  
☐ Recompletion  
☒ Change in Ownership  
Change in Transporter of:  
☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
Other (Please explain)  
Change of operator's name  
effective April 1, 1988  
If change of ownership give name and address of previous owner  
Cities Service Oil & Gas Corp., P. O. Box 50250, Midland, TX 79710

II. DESCRIPTION OF WELL AND LEASE

Lease Name  
Federal AB  
Well No.  
7  
Pool Name, including Formation  
Mescalero Escarpe (Bone Springs)  
Kind of Lease  
State, Federal or Fee  
Fed.  
Lease No.  
NM 26884  
Location  
Unit Letter  
0  
990  
Feet From The  
South  
Line and  
1980  
Feet From The  
East  
Line of Section  
11  
Township  
18S  
Range  
33E  
NMPM, Lea  
Count

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐  
Texas-New Mexico Pipeline Company  
Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 2528 - Hobbs, New Mexico 88240  
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐  
Conoco, Inc.  
Address (Give address to which approved copy of this form is to be sent)  
P. O. Box 460 - Hobbs, New Mexico 88240  
If well produces oil or liquids, give location of tanks.  
Unit  
H  
Sec.  
11  
Twp.  
18S  
Rge.  
33E  
Is gas actually connected?  
Yes  
When  
5-7-87

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.

F. A. Vitran  
(Signature) F. A. Vitran  
strict Operations Manager - Production  
(Title)  
rch 15, 1988  
(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 19 \_\_\_\_  
BY \_\_\_\_\_  
Orig. Signed by  
Paul Kautz  
Geologist  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deeper well, this form must be accompanied by a tabulation of the deviat tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for all able on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of conditi  
Separate Forms C-104 must be filed for each pool in multi; completed wells.