S	TATE	OF	NEW	MEXICO	
ENERGY	AND N	AIN I	ERALS	DEPARTMENT	

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DISTRIBUTI	NC	
SANTA PE		
FILE	_	
U.8.0.8.	_	
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OF	I HC M	

I.

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator				
GREENHILL PETROLEUM CORPO	DRATION			<u></u>
Address				
16010 Barker's Point Lane	, Suite 325, Houston	TX 77079		
Reason(s) for filing (Check proper box)		Other (Please es	cplain)	
New Well	Change in Transporter of:		. / . /	
Recompletion		y Gas Effecti	ve 1/1/89	
X Change in Ownership	Casinghead Gas	ondensate		
If change of ownership give name Te	exaco Producing, Inc.	P. O. Box 728,	Hobbs, NM 88240	
and address of previous owner	Exact Froducing, Inc.			
	T A CT			
II. DESCRIPTION OF WELL AND LI	Well No. Pool Name, Including F	ormation K	ind of Lease	Lease No.
Lease Name	58 Lovington P	e	late, Federal or Fee Stat	e B-2359-1
Lovington Paddock Unit	Jo Lovington F			
Location		540	Feet From TheEast	
Unit Letter H : 1980	Feet From The <u>North</u> Li	ne and00	Feet From theLast	
			Lea	County
Line of Section 1 Townshi	ip 17S Range	<u>36E , NMPM,</u>		
		· -		
IIL DESIGNATION OF TRANSPOR	RTER OF OIL AND NATURA	LGAS	which approved copy of this for	m is to be sent)
Name of Authorized Transporter of Oll	or Condensate			
Texas New Mexico Pipeline		P. O. Box 2528	Hobbs, NM 88240	is to be centl
		Address (Give address 10	which approved copy of this for	
Name of Authorized Transporter of Casing? Phillips 66 Natural Gas (GPM Gas Corpo	ration EFFECTIVE, I	eprudry 1, TX 79762	
Phillips oo Natural Gas C	company vini		When	
	nit Sec. Twp. Rge.	Is gas actually connected	the transmission of tr	
If well produces oil or liquids, give location of tanks.	nii Sec. Twp. Rge. B 1 175 36E	Is gas actually connected Yes	N.A.	

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.

her lite	Gene	Linton_
(Signature)		
Production Coordinator		
(Title)		
December 28, 1988		
(Date)		

(713) 870-0606

OIL	CONSERVATION DIVISION
APPROVED	ORIGINAL SIGNED BY JERRY SEXTON
BY	ORIGINAL SIGNED BY ARMED ST
BT	DISTRICT I SUPERVISOR

TITLE

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

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

All sections of this form must be filled out completely for allow able 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 multipl completed wells.

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RECEIVED

JAN 4 1989 Actual Action