STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE			
FILE			
U.8.0.8.			
LAHO OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE		1	

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

Separate Forms C-104 must be filed for each pool in multiple completed wells.

REQUEST FOR ALLOWABLE

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
I			
Operator COP TO A TO A COP TO			
GREENHILL PETROLEUM CORPORATION			
Address	T. 17070		
16010 Barker's Point Lane, Suite 325, Houston,	TX //0/9 Other (Please explain)		
Reason(s) for filing (Check proper box)	Oluer (Licente explain)		
New Well Change in Transporter of: Dry Gas Effective 1/1/89			
Hecompliation Co.			
X Change in Ownership Casinghead Gas Con			
If change of ownership give name Texaco Producing, Inc., P. O. Box 728, Hobbs, NM 88240			
and address of previous owner TEXACO I TOURCHIR; THE.; I. O. DOX 7201 HODDS: NO BRZ40			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name Well No. Pool Name, including Fo	1		
Lovington Paddock Unit 46 Lovington Pa	ddock State B-1553		
Location			
Unit Letter D: 660 Feet From The North Line and 990 Feet From The West			
Line of Section 1 Township 17S Range 3	BE , NMPM, Lea County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Natural Transporter of Oil [v] or Condensate Address (Give address to which approved copy of this form is to be sent)			
Kame of Variation 11-maps and			
Texas New Mexico Pipeline Company (0095-0512) P. O. Box 2528, Hobbs, NM 88240			
Name 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 Company GPM Gas Corpo	TOWN Penhrook, Odessa, TX 79762		
If well produces oil or liquids,	Yes N.A.		
dies tocation of touch	<u> </u>		
If this production is commingled with that from any other lease or pool, give commingling order numbers			
NOTE: Complete Parts IV and V on reverse side if necessary.			
VI. CERTIFICATE OF COMPILANCE			
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED JAN 1 0 1005 19		
been complied with and that the information given is true and complete to the best of			
my knowledge and belief. BYBISTRICT SUPERVISOR			
	TITLE		
	11165		
This form is to be filed in compliance with RULE 1104.			
Gene Linton	If this is a request for allowable for a newly drilled or deepens		
(Signature)	well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
Production Coordinator	All sections of this form must be filled out completely for allow		
(Title)	able on new and recompleted wells.		
December 28, 1988	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		
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(713) 870-0606

(Date)

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JAN 4 1989

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