STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTIO	N		
SANTA PE			
FILE			
U.8.0.8.			
LAND OFFICE			
TRANSPORTER	OIL		
IRABIPORTER	GAS		
OPERATOR			Γ
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							
GREENHILL PETROLEUM	CORPORATIO	N					
Address			Ter Ter	77079			
16010 Barker's Point	Lane, Sui	te 325, Hou	ston, lex	Other (Please	explaint	<u> </u>	
Reason(s) for filing (Check proper box,)						
New Vell	Change in	Transporter of:	7	TEE	tive 1/1/89		
Recompletion	ᆸᅄ	Ļ	Dry Gas	Ellec	LIVE 1/1/05		
X Change in Ownership	Casin	ghead Gas	Condensate	1			
		_		D 700	Habbe NM 88	240	
If change of ownership give name and address of previous owner	Texaco Pro	oducing, Inc	<u>., P. O.</u>	BOX /20,	Hobbs, NM 88	240	
				. Lilân			
II. DESCRIPTION OF WELL AN	D LEASE			11/1/90	Kind of Lease		Lease No.
Lease Name	Well No.	Pool Name, Inches	bg Kormation	R-9345	State, Federal or Fe	• State	B-4120-
West Lovington Unit	55	Lovington	San Andres	s West	alder, redetet et t	- Deace	
						7 .	
\mathbf{F} : 19	980 Feet Fro	m The North	Line and	1980	Feet From The	west	
Unit Letter F;					_		6
Line of Section 8 To	wmship 17S	Range	, <u>36E</u>	, NMPN	u, Lea	·······	County
III. DESIGNATION OF TRANS	PORTER OF	OIL AND NAT	JRAL GAS			- al this form is	to be sent!
Name of Authorized Transporter of Of	I TT or C	ondensate			so which approved co		,
Texas New Mexico Pipe	line Compa	nv (0095-00	03) P.O.	Box 2528	, Hobbs, NM 8	8240	
Name of Authorized Transporter of Co	asinghead Gas &	or Dry Gos	Address	· (Cine address	E: February I; Odessa, TX	1992 10rm 1	1 10 De tent)
		, GPM Gas	Corporation	Penbrook	, Odessa, TX	79762	
Phillips 66 Natural G	Unit Sec		e. ls qua	actually connec	ued? When		
If well produces oil or liquide, give location of tanks.	IIS	5 17S	36E	Yes		N.A.	
If this production is commingled w	with that from a	ny other lease or	pool, give co	mmingling ord	er numberi		
tt mee biogeneries							

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.

	finte	Gene Linton		
(Signature)				
; (Signature) Production Coordinator				
(Title)				
(Title) Decèmber 28, 1988				
(Date)				

(713) 870-0606

OIL CO	JAN 1 1 1923
APPROVED	ORIGINAL SIGNED BY JERRY SEXTON
BY	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 RULE 111.

All sections of this form must be filled out completely for allou able on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owne well name or number, or transporter, or other such change of conditio:

Separate Forms C-104 must be flied for each pool in multip: completed wells.