

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
Former OM-01-83
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SANTA FE	
PIER	
U.S. R.F.	
LAND OFFICE	
TRANSPORTER	OIL
	NAT.
OFF. OF OIL	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR

Operator: Hondo Oil & Gas Company

Address: P. O. Box 2208, Roswell, New Mexico 88201

(Comments) for filing (Check proper box)

New Well

Recombination

Change in Ownership

Change in Transporter of:

Oil

Condensate Gas

Dry Gas

Condensate

Other (Please explain): Change in Operator name Effective March 1, 1987

If change of ownership give name and address of previous owner: ARCO Oil and Gas Company - Division of Atlantic Richfield Company
P. O. Box 1610, Midland, Texas 79702

II. DESCRIPTION OF WELL AND LEASE

Location	State <u>AZ</u>	Well No. <u>2</u>	Field Name, Landowner, Formation	Kind of Lease	Lease No.
			<u>Scharb Bone Springs</u>	<u>State</u>	<u>NM899</u>
Location	U&M Letter <u>H</u>	Year <u>1980</u>	Foot From The <u>North</u> Line and <u>660</u>	Foot From The <u>East</u>	
Line of Section	<u>6</u>	Township <u>19S</u>	Range <u>35E</u>	County <u>Lea</u>	Country

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorizing Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	<u>Texas-New Mexico Pipeline Company</u>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorizing Transporter of Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	<u>Phillips Petroleum Company 66 Null Gas</u>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give acreage of lease.	UNIT <u>A</u> Acres <u>6</u> 1/4 Sec. <u>19</u> 3/4	Is well currently producing? <input checked="" type="checkbox"/> When <u>8-25-83</u>

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.

Brent Manning
(Title) _____
PROD SEC

2/27/87
(Date) _____

OIL CONSERVATION DIVISION

APPROVED MAR 11 1987, 19 _____

BY ORIGINAL SIGNED BY JERRY SEXTON

TITLE DISTRICT I SUPERVISOR

This form is to be filed in compliance with RULE 1194.

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 logs taken on the well in accordance with rule 111.

All sections of this form must be filled out completely for allowable on new and reworked wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such changes of condition.

Separate Form C-104 must be filed for each pool in multiply completed wells.