

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-01-78
Format 06-01-83
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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

I. Operator Gary Bennett

Address P. O. Box 16844, Lubbock, TX 79490

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)

If change of ownership give name and address of previous owner Celtic Oil Corporation and/or Interfirst Bank Odessa

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>21</u> <u>Cavalcade Federal 21</u>	Well No. <u>4</u>	Pool Name, including Formation <u>Queen Anne</u> <u>Quernecho Plains-Penrose</u>	Kind of Lease State, Federal or Fee <u>Federal</u>	Lease No. <u>NM59044</u>
Location				
Unit Letter <u>P</u>	<u>400</u>	Feet From The <u>South</u>	Line and <u>660</u>	Feet From The <u>East</u>
Line of Section <u>21</u>	Township <u>18S</u>	Range <u>32E</u>	NMPM, <u>Lea</u>	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

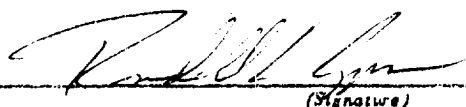
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Koch Oil Company</u>	<u>POB 3609, Midland, TX 79701</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Phillips Petroleum Company</u> <u>66 Natl Gas</u>	<u>Bartlesville, OK 74004</u>
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
<u>I</u> <u>21</u> <u>18S</u> <u>32E</u>	<u>Yes</u> <u>12-5-84</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.



Consultant

6/24/87

(Title)

(Date)

OIL CONSERVATION DIVISION

JUN 29 1987

APPROVED _____, 19 _____

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 deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable 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 multiply completed wells.

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