## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

|                  | 11460 | T |  |
|------------------|-------|---|--|
| DISTRIBUTION     |       |   |  |
| BANTA PE         |       |   |  |
| FILE             |       |   |  |
| U.8.0.8.         |       |   |  |
| LAND OFFICE      |       |   |  |
| TRANSPORTER      | DIL   |   |  |
|                  | GAS   |   |  |
| OPERATOR         |       |   |  |
| 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

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

REQUEST FOR ALLOWABLE AND

| AUTHORIZATION TO TRANSF  | PORT DIE AND NATUKAL GAS  |  |
|--|---|--|
| Operator   |   |  |
| Armstrong Energy Corporation   |   |  |
| Address  |   |  |
| P.O. Box 1973 Roswell, NM 88201  |   |  |
| Reason(s) for filing (Check proper box)  | Other (Please explain)  |  |
| New Well Change in Transporter of:   | Name Change effective 5/1/87  |  |
| The state of the s | y Gds   |  |
| Change in Ownership Casinghead Gas Co  | ondensate   |  |
| If change of ownership give name and address of previous owner Chevron U.S.A. Inc., F  | P.O. Box 670, Hobbs, NM 88240   |  |
| II. DESCRIPTION OF WELL AND LEASE  |   |  |
| Lease Name   Well No.   Pool Name, Including Fo  | ormation Kind of Lease Lease No.  |  |
| West Pearl Queen Unit 13   Pearl (Queen)   | State, Federal or Fee State E-585   |  |
| Location   |   |  |
| Unit Letter P: 600 Feet From The South Lin   | e and 660 Feet From The East  |  |
| Unit Letter  | _   |  |
| Line of Section 30 Township 195 Range 35   | SE , NMPM, Lea County   |  |
|  | The friet will  |  |
| III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL   | GAS The Infection with Jorn is to be sent)  |  |
| 705  |   |  |
| Shell Pipeline Corporation  Name of Authorized Transporter of Casinghead Gas or Dry Gas  | Address (Give address to which approved copy of this form is to be sent)                            |  |
| Name of Authorized Transportation Continguate Contingu |   |  |
| Unit Sec. Twp. Rge.  | is gas actually connected? When   |  |
| If well produces oil or liquids, give location of tanks.  B 32 19 35   |   |  |
| 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.  |   |  |
|  | OIL CONSERVATION DIVISION   |  |
| VI. CERTIFICATE OF COMPLIANCE  | MAY 1 1 1987  |  |
| I hereby certify that the rules and regulations of the Oil Conservation Division have  | APPROVED MIMI I 1 1007 19   |  |
| been complied with and that the information given is true and complete to the best of  |   |  |
| ly knowledge and belief.  BY — ORIGINAL SIGNED BY JERRY SEXTON   |   |  |
| TITLE DISTRICT I SUPERVISOR  |   |  |
| This form is to be filed in compliance with AL   |   |  |
| Krout Del  | If this is a request for allowable for a newly drilled or deepened                                  |  |
| (Signature)   well, this form must be accompanied by a tabulation  |   |  |
| President  | tests taken on the well in accordance with RULE 111.  |  |
| (Title)  | All sections of this form must be filled out completely for allowable on new and recompleted wells. |  |
| May 1, 1987 Fill out only Sections I, II, III, and VI for cha-   |   |  |
| (Date)   | well name or number, or transporter, or other such change of condition.                             |  |