

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

NO. OF COPIES RECEIVED	
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRORATION OFFICE	

I.

Operator <u>d</u> Marks <u>A</u> Garner Production Company	
Address P O Box 70, Lovington, New Mexico 88260	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner S E Production Company, Box 763, Hobbs, NM 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name Charlotte State	Well No. 2	Pool Name, Including Formation Eumont-Yates-Seven Rivers Queen	Kind of Lease State, Federal or Fee State	Lease No. E-1639
Location Unit Letter <u>C-N</u> ; 660 Feet From The <u>North</u> Line and 1980 Feet From The <u>West</u> Line Line of Section <u>29 32</u> Township 20S Range 36E , NMPM, Lea 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"/> <u>Permian</u>	Address (Give address to which approved copy of this form is to be sent) <u>Phillips 66 Natural Gas Company</u>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips 66 Natl Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>C&GL Gas Settlements, Bartlesville, OK 74004</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>N</u>	Sec. <u>29</u>	Twp. <u>20</u>	Rge. <u>36</u>	Is gas actually connected? <u>yes</u>	When <u>6-27-69</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.

Delma M. McCarroll
(Signature)
Bookkeeper
(Title)
2-23-88
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19 _____

BY _____
Orig. Signed 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.