STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION
P O BOX 2088
SANTA FE, NEW MEXICO 87501

ILLEGIBLE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Address
P. O. Box 731, Hobbs, New Mexico 88241

Reason(s) for filing (Check proper box)
New Well
Change in Transporter of:
Oil
Dry Gas
Casinghead Gas
Condensate

Other (Please explain)

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
East Dumont Unit	26	Dumont Yates 7-Rivers Queen	State, Federal or Fee FEE	

Location
Unit Letter N ; 660 Feet From The South Line and 1980 Feet From The West

Line of Section 3 Township 19S Range 37E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil XX or Condensate	Address (Give address to which approved copy of this form is to be sent)
Texas New Mexico Pipeline o (0055-1951)	PO Box 2528, Hobbs, New Mexico 88240
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
None	

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	M	3	19S	37E	No	

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.

J a Head
(Signature)

Hobbs Area Superintendent 397-3571
(Title)

9-9-88
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 22 1988, 19

BY ~~ORIGINAL SIGNED BY JERRY SEXTON~~

TITLE DISTRICT I SUPERVISOR

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.