

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

Amended

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Roger O. Goza
Address
P.O. Box 1313, Monahans, Texas 78756
Reason(s) for filing (Check proper box)
☐ New Well ☒ Change in Transporter of:
☐ Recompletion ☒ Oil ☐ Dry Gas
☒ Change in Ownership ☐ Casinghead Gas ☐ Condensate
Other (Please explain)

If change of ownership give name and address of previous owner Texas American Oil Corporation - 300 W. Wall St., Midland, TX 78701

Lease No. NM-032 (29-000082)
II. DESCRIPTION OF WELL AND LEASE
Lease Name D&E Federal Well No. 2 Pool Name, including Formation Lynch (Seven Rivers) Kind of Lease Federal Lease No. see above
Location
Unit Letter B : 2310 Feet From The East Line and 330 Feet From The North
Line of Section 27 Township 20-S Range 34-E , NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil ☒ or Condensate ☐
Texas - New Mexico Pipeline Company Address (Give address to which approved copy of this form is to be sent)
Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
N/A Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit N Sec. 22 Twp. 20-S Rge. 34-E Is gas actually connected? no When

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.

Roger O Goza by JLO
(Signature)
Operator
(Title)
6/30/87
(Date)

OIL CONSERVATION DIVISION
JUL 6 1987
APPROVED _____, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR
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 deviated 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 multiple completed wells.

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NOTICE THAT THE ABOVE IS A COPY
OF THE ORIGINAL RECORD

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JUL 6 1881
HOBBS OFFICE