

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES DESIRED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.A.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	NAT
PRODUCTION 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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Horizon Oil & Gas Co.

Address
P.O. Box 7 Spearman, Texas 79081

Reason(s) for filing (Check proper box)

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

If change of ownership give name and address of previous owner _____ THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE. *Arrange factor 152*

II. DESCRIPTION OF WELL AND LEASE

Lease Name Anderson	Well No. 1	Pool Name, including Formation Monument Tubb	Kind of Lease R-8826 1/1/89	State, Federal or Fee Fee	Lease No.
Location Unit Letter 0 ; 330 Feet From The South Line and 1980 Feet From The East Line of Section 8 Township 20S Range 37E , NMPM, Lea County					

III. DESIGNATION OF TRANSPORTED OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading & Transportation Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188 Houston, Texas 77251-1188
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) P.O. Box 15189 Tulsa, Oklahoma 74102
If well produces oil or liquids, give location of tanks. Unit 0 Sec. 8 Twp. 20S Rgs. 37E	Is gas actually connected? YES When January 19, 1988

If this production is commingled with that from any other lease or pool, give commingling order number: R-8722 *OKC*

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.

Curtis F. Covington
Engineer
(Signature)
(Title)
9-20-88
(Date)

OIL CONSERVATION DIVISION
SEP 22 1988

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 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.