STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	_
DIST R IS UT 10H	1
PILE	
V.8.0.A.	1
LAND OFFICE	
TRAMPPORTER DIL	
Bas	
OPERATOR.	
PROBATION OFFICE	

OIL CONSERVATION DIVISION P. Q. 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 CAS

PROBATION OFFICE	AUTHORIZATION TO TRANS	PORT OIL AND NAT	URAL GAS	
Graham Roy	alty, Ltd.			
	y Plama, Suite 400, 16 lorado 80202	75 Larimer St.		
Reesen(s) for filing (Check proper box)		Other /Plea	SC ESPIGIN)	
New Woll	Chance in Transporter of:		•	
Recompletion	c.i D	Effective Date of Change		
Change in Ownership	Casinghead Gas	ondensore of Ope	rator July 1 1987	
If change of ownership give name Pe	tro-Lewis Corporation,	P.O. Box 9050	0, Houston, Texas 77290	1
II. DESCRIPTION OF WELL AND	LEASE Well No. Pool Name, Including F		Kind of Lease	
Datay Fodonal	Eunice Monumen		Stone, Federal or Fee Federal	Lease No.
Patsy F edera l	1	HO-21	Side. Facilities For Tederal	031621(a)
R (-93) 660	N 1	1000	Fact	
Unit Letter B ; 660	Feet From The North Lis	ne and <u>1980</u>	Feet From The Bast	
Line of Section 18 Towns	thup 20S Roonge	37E	m. Lea	_
Line of Section 10 Towns	ALIP 203 ROMAN	, NMP	м, 100	County
Name of Authorized Transporter of Oil Shell Pipeline Name of Authorized Transporter of Camina Warren Petroleum If well produces off or liquids, give location of tanks.		P.O. Box 2648	•	
If this production is commingied with	that from any other lease or pool,	give commingling ord	er number:	
		•		
NOTE: Complete Parts IV and V	on reverse side if necessary.			
VI. CERTIFICATE OF COMPLIANCE	Œ	OIL	CONSERVATION DIVISION	
			HH 2 2 1987	
I hereby certify that the rules and regulations been complied with and that the information i		APPROVED	10F 5 4 1301	., 19
my knowledge and belief.	great B ddc and complete to the best of	BY		
Graham Royalty, Ltd.		ORIGI	NAL SIGNED BY JERRY SEXTON	
Grandin Hoyarcy, Jour.	•	TITLE	DISTRICT I SUPERVISOR	
10 hours		This form is t	o be filed in compliance with MUL	
sy: Of there	A. J. Reves	11	quest for allowable for a newly dril	
Signatur		well, this form mu	at be accompanied by a tabulation well in accordance with AULE 1:	of the deviation
Division Manager		i t	f this form must be filled out comp	· · ·
(Title)		shie on new and re	ecompleted wells.	incarà in Effor
July 6, 1987		Fill out only	Sections I. II. III, and VI for the	nges of owner,
(Date)	Į.		er, or transporter, or other such chan is C-104 must be filed for each i	
	į	completed wells.	10- mest 64 itted tot sect 1	seer to sumstibly

