

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| TRANSPORTER | <input type="checkbox"/> OIL <input type="checkbox"/> GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator

Saba Energy, Inc.

Address

P.O. Box 9931, Midland, TX 79707

Reason(s) for filing (Check proper box)

☐ New Well
☐ Recompletion
☐ Change in Ownership
Change in Transporter of:
☒ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate

Other (Please explain)

Effective July 1, 1986

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

| | | | | | |
|------------|----------|--------------------------------|-----------------------|-----|-----------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Fee | Lease No. |
| Howse B | 1 | House San Andres | State, Federal or Fee | Fee | |

Location

Unit Letter P : 660 Feet From The South Line and 660 Feet From The East

Line of Section 11 Township 20S Range 38E , NMPM, Lea County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | |
|--|--|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Pride Pipeline Company | P.O. Box 2436, Abilene, TX 79604 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| El Paso Natural Gas Company | P.O. Box 1492, El Paso, TX 79978 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. <u>F</u> <u>12</u> <u>20S</u> <u>38E</u> |
| Is gas actually connected? | When <u>Yes</u> <u>5/1/74</u> |

If this production is commingled with that from any other lease or pool, give commingling order number: DLC-13

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.


(Signature)

Vice-President

(Title)

7/8/86

(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 1 1986, 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.