NO. OF SPIES REC		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISS

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS LAND OFFICE THANSPORTER OLA OPERATOR TRANSPORTER OLA OPERATOR TRANSPORTER P. O. BOX 1009 - Robbs, New Mexico 88240 Personality in gifter proper box Description TRANSPORTER OIL CO., INC. Address P. O. BOX 1009 - Robbs, New Mexico 88240 Personality in gifter proper box Oil	FILE	REQUES	REQUEST FOR ALLOWABLE		Supersedes Old C-104 and C- Effective 1-1-65	
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PRIGNATION OF FIGE			WHO OR OLL AND MA	ATURAL GAS		
DESCRIPTION OF FILE	TRANSPORTER					
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AGRESS P. O. SOX 1059 - Robbe, New Mexico 88240 Respect of the Thing (Affect proper law) New well Change in Connectable State "A" A/C-2 47 South Eunice 7-Ryr, Queen State "A" A/C		<u> </u>				
Address P. O. 80x 1069 - Bobbs	·	lL				
P. O. 80x 1009 - Hobbs, New Marico 88240 Reason() In filling (Force proper host) Change in Transporter of: Change in Consequent of: Consequent of: Change in Consequent o	TEXAS PACIFIC OIL	CO., INC.				
Consequence		Obbe. New Mayton 88240				
Control Cont	Reason(s) for filing (Check proper	box)	Other (Please e	xplain/		
Conditional		Change in Transporter of:		,		
If change of ownership give name and address of previous owner. Loss Loss			Gas			
DESCRIPTION OF WELL AND LEASE Lease Norm	Change in Ownership	Casinghead Gas X Con-	densate			
Description of Well and Lease Seath of Pool State, Including Formation State "A" A/c-2 47						
State "A" A/C-2	DESCRIPTION OF WOLL AS	VP V PAGE				
State "A" A/C-2 47 South Sunice 7-RVT. Queen State TA" A/C-2	Lease Name		Formation K	Ind of Lease		
Description Complete Comple	State "A" A/c-2	47 South Eunice			Lease No.	
Designation S Township 22-S Rooge 36-E NNOV, Los Countries				Stat	• NM 2A	
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Notice of Authorized Transporter of Oil Condensate Oil Condensate	Unit Letter ; 60	Feet From The North	ine and 1980	Feet From The		
Designation of Transporter of Oil Or Condensate Or Conde	Line of Section & 5	Township 22-3 Range	36- F . NMPM. 1	• _		
Shell Pipeline Corp. Address of the address to which approved copy of this form is to be sent)				L. A.	County	
Shell Pipeline Corp. P.O. Box 1509 - Midland Tarshin is to be sent) Phillips Pipeline Address to make approach code of the form is to be sent) Phillips Pipeline It well produces cit or limits No. 5 22 36	Name of Authorized Transporter of		Address (Cive address to	Link	····	
Phillips Pipeline If well produces eth critical defense to united approved copy of this format these seast) Phillips Pipeline If well produces eth criticals, Constant to the content of tants. If this production it commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Designate Type of Completion – (X) Date Spudded Date Completion – (X) Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allo alle for this depth or be for full 28 hours) Date First New Cill Bun To Tanks Date of Test Tubing Pressure Casing Pressure Choke Size Address in which approve comminging order number: Commission for full 28 hours) Despit Casing Shoe Tubing Pressure Choke Size Choke Size OIL -Bbls. Water-SELs. Gas-MCF Approve or first which approve comminging order number: Commission for full 28 hours) Choke Size OIL CONSERVATION COMMISSION Approve or first which the rules and regulations of the Oil Conservation have been complised with and that the information given charmed or production to the best of my knowledge and belief. By	I					
### Philing Biology Philing	Name of Authorized Transporter of	Casinghead Gas or Dry Gas	Address (Give address to u	hich approved copy of this	form (S to be sent)	
If this production is commingled with that from any other Jease or pool, give commingling order number: COMPLETION DATA Designate Type of Completion — (X) Date Spudded Date Compl. Ready to Prod. Elevations (DF, RKB, RT, CR, etc.) Name of Producing Fermation Tubing, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) Date First New Cill Run To Tance Length of Test Actual Prod. During Test Tubing Pressure (Shut—in) Casing Pressure Chick Size CASING & TUBING Of Test Dill Bible. Oil Bible. Oil Conservation Casing Pressure (Shut—in) Can APPROVED APPRO	Phillips Pipeline		i			
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original signed by	Original Signed by C. R. Tilley (Signature) Area Production Foresen (Title)		• • • • • • • • • • • • • • • • • • • •			
C. R. Tilley 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.			
(Signature) well, this form must be accompanied by a tabulation of the deviation						
Area Production Forenen tests taken on the well in accordance with RULE 111.						
able on new and recompleted wells.						
Fill out only Sections I, II, III, and VI for changes of owner			Fitt out only Sections I. II. III, and VI for changes of owner,			
(Date) well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiply	(Date)		well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply			