

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION 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 Dwight A. Tipton		
Address c/o Oil Reports & Gas Services, Inc., P. O. Box 755, Hobbs, NM 88241		
Reason(s) for filing (Check proper box)		Other (Please explain)
<input type="checkbox"/> New Well	Change in Transporter of:	Effective 7/1/86 <i>Change in lease name</i>
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas	
<input checked="" 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: BTA Oil Producers, 104 South Pecos, Midland, Texas 79701

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rock Lake	Well No. 1	Pool Name, Including Formation Jalmat T-Y-SR	Kind of Lease (State, Federal or Fee) State	Lease No. LG-358
Location				
Unit Letter H	1980	Feet From The North	Line and 330	Feet From The East
Line of Section 15	Township 22S	Range 35E	, NMPM, Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Enron Oil Trading & Transportation Co.

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)
Tesoro Crude Oil Company	8700 Tesoro Drive, San Antonio, TX 78286
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
None - TSTM	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.
	H 15 22S 35E
Is gas actually connected?	When
No	

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.

Douglas Hall
(Signature)
Agent
(Title)
7/8/86
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 10 1986, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

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.

Transcript of Interview of
[Name] on [Date]
BB-1-100000-100000-100000

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JUL 9 1986
O.C.D.
HOBBS OFFICE