STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE			
FILE			
U.S.G.S.			
LAND OFFICE			
TRANSPORTER OIL BAS			
OPERATOR			
PROBATION 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

Ope	retor				
	Marks-Garner Production COmpany				
Add	ress				
	P O Box 70, Loving				
Rea	ison(s) for filing (Check proper box)		Other (Please explain)	
	New Well	Change in Transporter of:			
	Recompletion	XXOII	Dry Gas	4-01-87	
	New Well Recompletion Change in Ownership	Casinghead Gas	Condensate		
L					

If change of ownership give name and address of previous owner ____

II. DESCRIPTION OF WELL AND	D LEASE						
Lease Name	Well No.	Pool Name, Incl	uding Format	lon	Kind of Lease		Lease No.
Wilson State	2	<u>Wilson Ya</u>	tes-Seve	n Rivers	State, Federal or Fe	State	<u>B-11610</u>
Location							
Unit Letter J : 2310	Feet From	The Sout	h Line and	2310	Feet From The	_East	
Line of Section 23 Tow	mahir 215	Ra	n ge <u>3</u> 2	Е , ММРМ	• Lea	•	County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Shut In SWD Well							
Name of Authorized Transporter of Oll And or Condensate Address (Give address to which approved copy of this form is to be sent)				be sentj			
Navelio Refining Company P O Box 159. Artesia. NM 88210							
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)			be sent)				
If well produces oil or liquids, give location of tanks.	Unit Sec.	3 21	Rge. 15 0 34	as actually connect	ed? <mark> </mark> When 		

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.

(Signature) (Tule) (Date)

	OIL CONSERVATION DIVISION
	D
BT	DISTRICT I SUPERVISOE

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.