STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

. ** 1.** ***		
DISTRIBUTION		
BANTA FE		
FILE		
U.B.O.B.		
LAND OFFICE		_
TRANSPORTER	DIL	
	BAD	
OPERATOR .		
PAGRATION 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

Separate Forms C-104 must be filed for each pool in multiply

OPKRATON RE	QUEST FO	OR ALLOWABLE			
PROBATION OFFICE AND					
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
Operator					
Lyny Petroloum Conquiters	T				
Lynx Petroleum Consultants.	TUC				
P 0 P 1666 11 11 116					
P. O. Box 1666. Hobbs. NM Reason(s) for filing (Check proper box)	88241				
		Other (Please exp	lain)		
M	7	Dry Gas			
A Change in Ownership Casinghead Gas		Condensate			
If change of ownership give name	D 0	7			
and address of previous owner Conoco, Inc.,	<u>P. O.</u>	Box 460, Hobbs,	NM 88241	_	
II. DESCRIPTION OF WELL AND LEASE IN Well No. Pool Name	4				
l n		1	d of l_ease	Lecse No.	
	(Yates	s-7Rvrs-Queen) Stat	e, Foderal or Fee Fee		
Location					
Unit Letter D : 660 Feet From The No	orth L	ne and 440 F	ot From The West		
					
Line of Section 5 Township 21S	Range	37E , NMPM,	Lea	County	
III. DESIGNATION OF TRANSPORTER OF OIL AND	NATTIRA	L GAS			
Name of Authorized Transporter of Oil or Condensate _		Address (Give address to wh	ich approved copy of this form	is to be sent)	
		1			
Name of Authorized Transporter of Casinghead Gas or Dry (Sas 🗍	Address (Give address to wh	ich approved copy of this form i	is to be sent!	
			,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
If well produces oil or liquids, Unit H. Twp.	Rge.	Is gas actually connected?	When		
give location of tanks.	1		1		
					
If this production is commingled with that from any other lead	se or pool,	give commingling order num	ber		
NOTE: Complete Parts IV and V on reverse side if neces	isarv.				
		n ·			
VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION					
		1).		•	
I hereby certify that the rules and regulations of the Oil Conservation Di been complied with and that the information given is true and complete to	vision have	APPROVED	EP-9-0-100C	_, 19	
my knowledge and belief.	the best of]	EF 3 U 1300		
		DRIO!	NAL SIGNED BY JERRY SE	XTON	
		TITLE	DISTRICT I SUPERVISOR		
H ET]]			
Il + may	This form is to be filed in compliance with RULE 1104.				
(Signature)		If this is a request f	or allowable for a newly dri	lled or deepened	
Vice-President		well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.			
(Title)		All sections of this	form must be filled out comp		
09/25/86		spie on new and recompi	eted wells.	·	
(Date)		Fill out only Section	ne 1, II. III. and VI for ch	anges of owner,	
P == 1 /	j/	Maff bewa of brimbal of gr	aneflorten or other such chal	nge of condition.	

completed wells.

SEP 1986