STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
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Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
DOUG GRIMES

Address
1206 E. 15TH ST. MIDLAND, TEXAS 79701

Reason(s) for filing (Check proper box)

- [ ] New Well
- [ ] Recompletion
- [x] Change in Ownership
- Change in Transporter of:
  - [ ] Oil
  - [ ] Dry Gas
  - [ ] Casinghead Gas
  - [ ] Condensate

Other (Please explain)

If change of ownership give name and address of previous owner TEXNECO INC. P.O. BOX 730 HOBBS, NEW MEXICO 88240

I. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
SUNSHINE STATE	1	Drinkard	State, Federal or Fee STATE	B-1732

Location
Unit Letter C ; 660 Feet From The NORTH Line and 2209 Feet From The WEST

Line of Section 19 Township 21S Range 37E NMPM LEA County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [x] or Condensate [ ]	Address (Give address to which approved copy of this form is to be sent)
TEXAS-NEW MEXICO PIPELINE	BRUNSON BLDG. HOBBS, N.M. 88240
Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas [ ]	Address (Give address to which approved copy of this form is to be sent)
WARREN PETROLEUM CORP.	P.O. Box 1589 TULSA OKLA 74102

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	C	19	21	37	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.

Doug Grimes
(Signature)

Owner
(Title)

2-21-86
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 10 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 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.