ç	TATE	OF NEW	MEXCOD
ENF RET A	AND A	MINERALS	DEPARTMENT

DISSECUTI		1	
BARTA FE	1	1	
TILE	1	1	
U.S.O.F.	1	1	
LAND DEFICE		1	
TRAKLPORTER	OIL	1	1
	64.5	1	
OPERATON	1		
PROFATION GPPICE		1	

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator								
Lynx Petroleum Consu	iltant	s, Inc.						
Acarete								
P. O. Box 1666, Hobb	os, NM	88241	l					
Reusca(:) for filing (Check proper box)	Reusen(:) for filing (Check proper box)				Other (Please explain,			
New Well	Change in Transporter of:							
Recompletion	011	OII Dry Gas Ch			Change	Change in Operator		
Change in Ownership	Casinghead Gas Condensate							
If change of ownership give name Russell E. Leeser, 1390 Ridge Road, Littleton, CO 80120								
II. DESCRIPTION OF WELL AND LE			<u> </u>					
Leose Name	Well No.	Pool Name,	including F	ormation		Kind of Lease	Lease No.	
Nancy	1	Tubb				State, Federal or Fee Fee	13636	
Location								
Unit Letter N ; 660 Feet From The South Line and 1980 Feet From The West								
Line of Section 24 Township	<u>p 2</u>	<u>15</u>	Range	<u>37E</u>	, ММРМ	Lea	County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS								
Name of Authorized Transporter of Off [X]	or C	ondensate 🗌	Ĵ			o which approved copy of this form is t		
Hermian Corporation Image: Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas X or Dry Gas Address (Give address to which approved copy of this form is to be sent)								
Name of Authorized Transporter of Casinghe	ad Gas 🕅	or Dry G	as 🗍					
Техасо				1024	<u>E):)</u>	Jules Di 7412-		
If well produces oil or liquids,	Sec.	Twp.	Rge.	ls gas ac	tually connecte	d? When		
give location of tanks. N	<u>;</u> 2	4 <u> </u> 21S	<u>'37E</u>	Yes	3	Unknown		

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.

Vice-President (Tille) 03/10/87

(Date)

	ONSERVATION DIVISION	
APPROVED	MAR 2 5 1987	., 19

ORIGINAL SIGNED BY JERRY SEXTON BY 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 aeviation 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.

