

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 06-01-83
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Dos Amigos

Address
c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	Effective 10-1-87
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casingshead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner **Millard Deck Estate, P. O. Box 2546, Fort Worth, Texas 76113**

II. DESCRIPTION OF WELL AND LEASE

Lease Name L. W. White "A"	Well No. 1	Pool Name, Including Formation Eumont Yates SR-Ou	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East				
Line of Section 2 Township 21S Range 35E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casingshead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Barltesville, OK 74002
If well produces oil or liquids, give location of tanks. Unit B Sec. 2 Twp. 21S Rge. 35E	Is gas actually connected? Yes When 10-8-77

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.

Donna Walker
(Signature)

Agent
(Title)

10-14-87

(Date)

OIL CONSERVATION DIVISION

APPROVED **OCT 15 1987**, 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.

RECEIVED

OCT 14 1987

ACD

HCBB5 OFFICE