STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

·			• •							Form C-10	14
										Revised 1	
DISTRIBUTIC	DH			0	IL CONSI	ERV	TION	DIVISIO	N	Format 06	-01-83
SANTA FE		OIL CONSERVATION DIVISION P. O. BOX 2068							Page 1		
FILE											
U.S.O.S.					SANTA FE	E, NEV	VMEXI	CO 87501			
LAND OFFICE											
TRANSPORTER	OIL										
1	GAS				REQUE	ST FO	R ALLOW	ABLE			
OPERATOR						A	ND		•		
PAORATION OFF	HCE		•	AUTHOR	ZATION TO	TRANS	PORT OIL	AND NATU	RAL GAS		
l											
Operator											
	Bra	avo Op	perating	Compar	ıy						
Address											
	Ρ.	0. Bc	ox 2160,	Hobbs,	N. M. 88	241					
Reason(s) for fil	ing (C	heck pro	per box)					Other (Please	explain)		
New Well	•••			Chappe in	Transporter of:						
Recompletio			- /	ᆸᅄ		닐여	y Gas	Bravo	Energy, Inc.	Former Op	erator
🔀 Change In G	weers!	mp ope	RateR	Casin	ghead Gas		ondensate				
f change of own and address of p <u>1. DESCRIPTI</u> Lease Name	orevio	DF WEI	er		Pool Name, Inc.	-	ormation		Kind of Lease		Lease No.
Coogan	Fede	eral		1	Wantz	Abo	•		State, Federal or F	•• Federal	LC065525
Location											
Unit Letter	K		2875	Feet From	n The_lorth	Lin	• and2	810'	_ Feet From The	est	· · · ·
Line of Section	on	٦	Township	215	Ra	nge 3	7E	, NMPM,	Lea		County
						•					
III. DESIGNA	TION	OF TH	ANSPORT			TURAL	GAS				
Name of Authors	zed Tr	ansporter	r of Oll	or Co	ndensate		Address (Give address t	o which approved co	py of this form is	so be sent)
) Pipelir	•	•				B, Hobbs, N.		
Name of Authoria	zed Tre	ansporter	of Casinghed		or Dry Gas		Address (Give address t	o which approved ca	py of this form is	to be sent)
Texaco	Proc	lucing	j In.	-			P. 0.	. Box 300), Tulsa, OK	74102	
			Unit	Sec.	Twp. 1	Rge.		ually connecte			
If well produces give location of		liquid s ,	K	1	215			Yes		-17-88	

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.

Istream

•	(Signature)
	Production Supervisor
	(Túle)
	11-30-89
	(Doto)

•	DEC 0 4 1989							
APPROVED	ORIGINAL SIGNED BY JERRY SEXTON							
D Y	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 MULE 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 transporten or other such change of condition.

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