Submit 5 Copies
Appropriate District Office
DISTRICT 1
F.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil	No. Line County
Reson(s) for Filing (Check proper box) Reson(s) for Filing (Check proper box) New Well	Line
Six Desta Drive, Suite 5850 - Midland, Texas 79705 Reason() for Filing (Check proper box) New Well	Line
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Length of Test Tubing Pressure Casing Pressure Choke Size	
Length of Test Tubing Pressure	
	
Water - Bbls. Gas- MCF	
Actual Prod. During Test Oil - Bbls.	
GAS WELL	
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate	. —
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size	
VI. OPERATOR CERTIFICATE OF COMPLIANCE	
VI. OPERATOR CERTIFICATE OF COIVILIANCE OIL CONSERVATION DIVISION	
VI. OPERATOR 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 above OIL CONSERVATION DIVISION AUG 3 0 1383	<u> </u>
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is true and complete to the best of my knowledge and belief. Date Approved	1
- THE STATE OF THE PART OF THE	1
Signature By ORIGINAL SIGNED BY JERRY SEXTOR	
Signature Wm. Scott Ramsey General Manager DISTRICT I SUPERVISOR	
Printed Name Title Title	
July 13, 1989 915-687-1664 Date Telephone No.	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

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