

OIL CONSERVATION DIVISION

P. O. BOX 2098
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I, Bliss Petroleum, Inc.

P.O. Box 1817 Hobbs, NM 88241

Indicate by checking (Check proper box) Change in Transporter of: Other (Please explain)

☐ New Well ☐ Oil ☐ Dry Gas

☐ Reconnection ☐ Casinghead Gas ☐ Condensate

☐ Change in Ownership

Reconnection from Drinker

If change of ownership give name and address of previous owner: Bliss Petroleum, Inc.

II. DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including formation	Kind of Lease	Lease
<u>Owen "A"</u>	<u>1</u>	<u>Phibbey Oil & Gas</u>	<u>State, Federal or Fee</u>	<u>Fee</u>

Location: Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line of Section 3 Township 22-S Range 37-E , N.M.P.M. Lea Co.

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
<u>Shell Pipeline Company</u>	<u>P.O. Box 1910 Midland TX 79702</u>
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
<u>Texaco Producing Inc.</u>	<u>P.O. Box 3000 Tulsa, OK 74102</u>

If well produces oil or liquids, give location of tanks: Unit E Sec. 3 Twp. 22S Rge. 37E Yes 2/10/61

If a 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.

Rui Bliss
(Signature)
President
(Title)
7-22-86
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____
BY _____
TITLE _____

This form is to be filed in compliance with RULE 1104.
A request for allowable for a newly drilled or deepened well must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely, even on newly completed wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of condition.
Separate Form O-104 must be filed for each pool in multi-completed wells.