STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

	-		
DISTRIBUTE	1	Т	
SANTA FE			
FILE	1	Г	
V.S.G.S.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFF	ICE		_

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

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE

OFERATOR					AND		•		
PROBATION OFFICE	_	AUTHORI	ZATION T	O TRAN		L AND NA	TURAL GAS		•
I.							· Ortrice Orto		
Operator									
Bliss Ene	rgy Cort	oration							
Address									
P. O. Box	1817	Hobbe	, New M	evi co	88241				
Reason(s) for filing (Check pro		IDDUS	, INCW II	CALCO	00241	104 101-			
New Well	,	Chance to	T	-4-		Other (Fie	ase explain)		
			Transporter	o::					
Recompletion		닏ᅄ		닏	ע ספר פייע Gas Operator's Name Change				
Change in Ownership		Casing	head Gas	<u> </u>	Condensate	<u> </u>			
**									
If change of ownership give and address of previous own		liss Pe	troleum	Inc.	P. 0	. Box 18	317 Hobbs, NM	88240	
II. DESCRIPTION OF WE	II. AND II	FASE							
Lease Name	<u> ,,</u>		ool Name, I	ncluding	Formation		Kind of Lease		Legse No.
Baker ''B''		3	Penrose	e Skel	ly Gray	himo	State, Federal or Fee	Fee	Ledge No.
Location					czy.	, m	0.5.0, . 500.0, 0. 100		
т	1980	35	· C/	outh,		660	LI ₀	a±	
Unit Letter:	1900	_Feet From	The	L	ine and	000	Feet From The	5L	
10		20 0			27 17		т.		
Line of Section 10	Township	, 22 S	F	Range	37 E	, NMI	ьм, Lea		County
III. DESIGNATION OF TI		TER OF OI	L AND N	ATURA	L GAS				
Name of Authorized Transporte	1 of O11 🗀	or Con	densate 🗀		Address (Give addres	s to which approved copy (of this form is	so be sens)
None - Zone TA									
Name of Authorized Transporte		ad Gas	or Dry Go	·s []	Address (Give addres	s to which approved copy of	of this form is	to be sent)
					[
	Unit	Sec.	Twp.	Rge.	ls gas ga	ually conne	cted? When		
If well produces oil or liquids, give location of tanks.	1	,							
				<u> </u>	l No				·
If this production is comming	led with the	t from any	other lease	or pool	, give comm	ingling ord	er number:		
NOTE: Complete Parts IV	and Wan	managa aid	. <i>::</i>						
NOTE: Complete Parts IV	una v on	reverse sia	e ij necessi	<i>ary.</i>					
VI CEPTIFICATE OF COA	CDITANCE]]	ווח	CONSERVATION DI	VICIONI	
VI. CERTIFICATE OF COMPLIANCE				OIL CONSCITATION DIVISION					
I hereby certify that the rules and i	egulations of	the Oil Cons	ervation Divi	sion have	APPRO	ven S	FP4 1986		10
been complied with and that the int	ormation give	n is true and o	complete to the	he best of				,	
my knowledge and belief.			BY ORIGINAL SIGNED BY JERRY SEXTON						
					DISTRICT I SUPERVISOR				
					TITLE				
					700	a form ta t	o be filed in compliance		
Saul Blis	1						quest for allowable for		
	(Signature)				well, th	is form mu	st be accompanied by a	tabulation o	f the deviation
President					teets ta	ken on the	well in accordance wi	th RULE 11	1.
	(Title)	·				sections o	f this Jorn must be fille	d out comple	tely for allow
9-3-86		-			17	new and t-	completed wells.		
5-3-80	(Date)				Fill	out only	Sections I, II, III, and	VI for char	res of owner
	(/						r, or transporter, or othe		
					complete	erate horm d wells.	C-104 must be filed	for each po	ool in multiply

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