STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Date)

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TRANSPORTER	OIL	 	i	7
	DAS	ī	7	٦
OPERATOR		1	_	┪
PROBATION OFFICE				

OIL CONSERVATION DIVISION P.O. BOX 2088 SANTA FE, NEW MEXICO 37501

Form C-104 Revised 10-01-78 Format 06-01-33 Page 1

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.

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL CA

I. AUTHORIZATION TO TRAN	ASPORT OIL AND NATURAL GAS
Operator	
Kirby Exploration Company Of Texas	
P. O. Box 1745 Houston, Texas 77251	
Teason(s) for filing (Check proper box)	
New Well Change in Transporter of:	Other (Please explain)
	Dry Gas
X Change in Ownership Casinghead Gas	Condensate
If change of ownership give name and address of previous owner Petro-Lewis Corporation	P. O. Box 2250 Denver, Colorado 80201
II. DESCRIPTION OF WELL AND LEASE	
West No. Poot Name, including	Formation Kind of Lease
	ill Yt 7 Rivers State Foderal or Foo
(Pro Gas	
Unit Letter C : 100 Feet From The	ine and 1980 Feet From The
Line of Section 19 Township 22S Range	37E Lea Caunty
III. DESIGNATION OF TRANSPORTER OF OH AND MATTER	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	Agazens (Give address to which approved copy of this form is to be sent)
	described address to which approved copy of this form is to be sent)
Sampol Authorized Transporter of Gasinghed Gasin, or Cry Gasin	Address (Give address to watch approved copy of this form is to be sent)
If well produces oil or liquids. Unit Sec. Twp. Age. give location of tanks.	is gas actually connected? when
If this production is commingled with that from any other lease or pool.	zive commingling order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
hereby certify that the rules and regulations of the Oil Conservation Division have	1 400A
seem complied with and that the information given is this and complete as the	APPROVED 111 / 1984 . 19
ny knowledge and belief.	BY ORIGINAL SIGNAL
	TITLE DISTRICT SECTION
YUFF	This form is to be filed in compliance with RULE 1104.
Signature .	If this is a request for allowable for a sender delta-d
Production Supervisor	tests taken on the well in accordance with RULE 111.
(Title)	All sections of this form must be filled out completely for allow-