

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.O.B.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

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
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator James N. Evans		
Address c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241		
Reason(s) for filing (Check proper box)		Other (Please explain)
<input type="checkbox"/> New Well	Change in Transporter of:	Effective 4/1/88.
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	Change lease name from State
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	to Mobil State
	<input type="checkbox"/> Dry Gas	
	<input type="checkbox"/> Condensate	

If change of ownership give name and address of previous owner: Highland Production Co., 810 N Dixie Blvd., Suite 202, Odessa, TX 79761

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mobil State	Well No. 1	Pool Name, including Formation Jalmat Tansill-Yates-SR Gas	Kind of Lease State, Federal or Fee	Lease No. B-1517
Location				
Unit Letter O	1980	Feet From The East	Line and 660	Feet From The South
Line of Section 16	Township 23S	Range 36E	NMPM, Lea	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Texas-New Mexico Pipeline Co.	P.O. Box 2528, Hobbs, NM 88240
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips 66 Natural Gas Company	Bartlesville, Oklahoma 74004
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
O 16 23s 36E	Yes 6/5/67

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.

Donna N. Hales
(Signature)
Agent
(Title)
5/10/88
(Date)

OIL CONSERVATION DIVISION

APPROVED May 12 1988, 19
BY BY SEXTON
TITLE FOR

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 RULE 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 transporter, or other such change of condition.

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