

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator _____
Kirby Exploration Company Of Texas
Address _____
P. O. Box 1745 Houston, Texas 77251

Reasons for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas	Other (Please explain)
<input type="checkbox"/> Recompletion		<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership				

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

Lease Name <u>New Mexico M State</u>	Well No. <u>58</u>	Pool Name, including Formation <u>Langlie Mattix Seven Rivers</u>	Kind of Lease <u>State, Federal or Free State</u>	Lease No. <u>B-934</u>
Location <u>Queen Greyberg</u>				
Unit Letter <u>N</u>	<u>150</u>	Feet From The <u>South</u>	Line and <u>1360</u>	Feet From The <u>West</u>
Line of Section <u>20</u>	Township <u>22S</u>	Range <u>37E</u>	<u>NMPM</u>	Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Texas New Mexico Pipe Line Company</u>	<u>P. O. Box 1510 Midland, Texas 79701</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
<u>Getty Oil Company</u>	<u>P. O. Box 1404 Houston, Texas 77001</u>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. is gas actually connected? when
	<u>C 29 22S 37E Yes 12-22-71</u>

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.

IV. 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.

X. C. Ramsey
(Signature)
Production Supervisor
(Title)
12-1-84
(Date)

OIL CONSERVATION DIVISION
APPROVED DEC 27 1984, 19____
BY _____
TITLE _____

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.

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DEC 19 1984

POLICE OFFICE