

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	<input type="checkbox"/> OIL <input type="checkbox"/> GAS
OPERATOR	
PRODUCTION 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

I. Operator Bliss Energy Corporation

Address P. O. Box 1817, Hobbs, N.M. 88241

Reason(s) for filing (Check proper box)

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

If change of ownership give name and address of previous owner Bliss Petroleum, Inc, P. O. Box 1817, Hobbs, N.M. 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Grizzell/Deep</u>	Well No. <u>2</u>	Pool Name, including Formation <u>Drinkard</u>	Kind of Lease State, Federal or Fee <u>Fee</u>	Lease No.
Location				
Unit Letter <u>L</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>860</u> Feet From The <u>West</u>				
Line of Section <u>5</u> Township <u>22S</u> Range <u>37E</u> , NMPM, <u>Lea</u> 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"/> <u>Shell Pipe Line Company</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1910, Midland, Texas 79702</u>
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Getty Oil Company</u> <u>Lease Producing Inc</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 3000, Tulsa, Oklahoma 74102</u>
If well produces oil or liquids, give location of tanks. Unit <u>L</u> Sec. <u>5</u> Twp. <u>22S</u> Rge. <u>37E</u>	Is gas actually connected? <u>Yes</u> When <u>5/29/79</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.

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.

Paul Bliss
(Signature)
President
June 4, 1986
(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 2 1986, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
TITLE DISTRICT I SUPERVISOR

This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepens well, this form 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 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 multiple completed wells.

RECEIVED
AUG 22 1986
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