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STATE OF NEW MEXICO		
ENERGY MO MINERALS DEPARTMENT	Form G-10 Revised 1	
	TION DIVISION Format O	
BANTA FE		
U.S.O.A. SANTA FE, NEW		
LAND OFFICE		· .
TRANSPORTER OIL DECLIEST FOR		
	R ALLOWABLE	
PAGEATION OFFICE	PORT OIL AND NATURAL GAS	
Operator		
Baber Well Servicing Co.		
Address		
P. O. Box 1772, Hobbs, NM 88240		·
Reason(s) for filing (Check proper box)	Other (Please explain)	
New Well Charge in Transporter of: Recompletion Voll Dr	y Gas	
	y des	
		<u></u>
l change of ownership give name nd address of previous owner		· · ·
I. DESCRIPTION OF WELL AND LEASE	ormation Kind of Lease	Lease No.
New Mexico DL: State a / Cruz-Delaware		V-732
Location		v 7 52
	e and 1980 Feet From The East	
Unit Letter I ; 1980 Feet From The South Lin		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Line of Section 18 Township 23-S Range 3	33-Е , ммрм, Lea	County
······································		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	. GAS Address (Give address to which approved copy of this form i.	s to be sent)
Name of Authorized Transporter of City of Condensation	P.O. PRANCE 159 ARTESNA, N.M. BBZID	
Name of Authorized Transporter of Casinghead Gas Y or Dry Gas	Address (Give address to which approved copy of this form i.	
Phillips Petroleum Company 66 natl gaz	4001 Penbrook, Odessa, Texas 79762	
If well produces oil or liquide,	Is gas actually connected? When	
give location of tanks. I 18 23S 33E	yes <u>6-1-84</u>	······································
I this production is commingled with that from any other lesse or pool,	give commingling order number: CTB 308	
NOTE: Complete Parts IV and V on reverse side if necessary.		
	n _ ·	
71. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION	
	FEB 0 9 1989	
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	APPROVED CONTRACT INTERVIEW	EXTON
by knowledge and belief.	BYORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	
Co. A A A A	TITLE	
Mark & Clarke	This form is to be filed in compliance with RU	
(Signalwa)	If this is a request for allowable for a newly dri well, this form must be accompanied by a tabulation	s of the deviation
Enterneed	tests taken on the well in accordance with AULE 1	
(Tule)	All sections of this form must be filled out completely for allow able on new and recompleted wells.	
	Fill out only Sections I, II, III, and VI for ch	
(Deie)	well name or number, or transporter, or other such the	-
631-130 25 8 3 4	Separate Forma C-104 must be filed for each pool in multip. completed wells.	
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