

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 08-01-83  
Page 1

CO. OF COPIES DESIRED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.A.		
LAND OFFICE		
TRANSPORTER	OIL	
OPERATOR	GAS	
PRODUCTION OFFICE		

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

**I. Operator**  
Baber Well Servicing Co.  
Address: P. O. Box 1772, Hobbs, NM 88240

Reason(s) for filing (Check proper box):  
☐ New Well  
☐ Recompletion  
☐ Change in Ownership  
 Change in Transporter of:  
☒ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
 Other (Please explain):

If change of ownership give name and address of previous owner: Baber Well Servicing Co.  
Jim Kirkendall, Box 1772, Hobbs, NM 88240

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "DL" State	Well No. 4	Pool Name, including Formation Cruz-Delaware	Kind of Lease <u>State</u> Federal or Fee	Lease No. V-732
Location Unit Letter <u>N</u> : <u>330</u> Feet From The <u>South</u> Line and <u>2242</u> Feet From The <u>West</u> Line of Section <u>18</u> Township <u>23-S</u> Range <u>33-E</u> , NMPM, 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"/> Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 159 Artesia N.M. 80510
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company 66 Natl gas	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX. 79762
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rge. N 18 23S 33E	Is gas actually connected? When Yes 6-1-84

If this production is commingled with that from any other lease or pool, give commingling order number: CTB 308

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.

Mark D. Clark

(Signature)  
Engineer

(Title)  
2-8-89

(Date)

OIL CONSERVATION DIVISION

FEB 09 1989

APPROVED \_\_\_\_\_, 19

BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR

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 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.

FEB 07 1989

ORIGINAL SOURCE AT 12:00 PM  
JAN 27 1989

RECEIVED

FEB 8 1989

OCD  
HOBBS OFFICE