

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 06-01-83
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SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Energy Well Services Co.

Address P.O. Box 1772 Hobbs N.M. 88240

Reason(s) for filing (Check proper box):

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

Other (Please explain):

If change of ownership give name and address of previous owner:

ILLEGIBLE

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>TERMINAL FEDERAL</u>	Well No. <u>1</u>	Pool Name, including Formation <u>Double X Volcanic</u>	Kind of Lease State, Federal or Fee <u>FEDERAL</u>	Lease <u>NO. 33</u>
Location				
Unit Letter <u>C</u>	<u>1980</u> Feet From The <u>W</u> Line and <u>660</u> Feet From The <u>N</u>			
Line of Section <u>14</u>	Township <u>24-S</u>	Range <u>30 E</u>	NMPM, <u>LPL</u>	Col.

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <u>Navajo Refining Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Drawer 159 Artesia N.M. 88210</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips 66 Nat. Gas</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Terrell Road, Dallas Texas 75212</u>
If well produces oil or liquids, give location of tanks.	Unit <u>E</u> Sec. <u>10</u> Twp. <u>20</u> Rge. <u>32</u>
	Is gas actually connected? <input checked="" type="checkbox"/> When <input checked="" type="checkbox"/>

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.

Mark D. Clark

(Signature)

ENGINEER

(Title)

2-9-89

(Date)

OIL CONSERVATION DIVISION

FEB 10 1989

APPROVED _____, 19

BY ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I 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 deep well, this form must be accompanied by a tabulation of the devi tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for a able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of o well name or number, or transporter, or other such change of condi

Separate Form C-104 must be filed for each pool in mul completed wells.

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