| STATE OF NEW MEXICO | | GIBLE | | • |
|--|---|---------------------------------------|------------------------------|--|
| ENERGY AND MINERALS DEPART | MENT | JIDLL | | |
| | Bann Bann Bann V | | | Form C-104 Revised 10-01-78 |
| DISTRIBUTION | OUL CONCERNA | TION DUVICIO | N ! | Format 06-01-63 |
| BANTA FE | OIL CONSERVA | | N | Page 1 |
| FILE | P. O. BO | | | |
| U.8.G.8. | SANTA FE, NEW | MEXICO 87501 | | |
| LAND OFFICE | | | | |
| TRANSPORTER OIL | | | | |
| OPERATOR | | RALLOWABLE | • | |
| PROBATION OFFICE | | | | |
| Ι. | AUTHORIZATION TO TRANSF | ORT OIL AND NATUR | (AL GAS | |
| Operator / 2 | | | | |
| Trees ven Ter | survice Co. | | | |
| E & | HORDY N.M. SS21 | .? | | |
| Reason(s) for filing (Check proper | | Other (Please | erolani | |
| New Well | Change in Transporter of: | | | |
| | | | | |
| Recompletion | | y Gas | | |
| Change in Ownership | Casinghead Gas Ca | ndensate | | |
| II. DESCRIPTION OF WELL | AND LEASE | | Kind of Lease | Lease |
| JELINIALLE FELER | | | State, Federal or Fee | |
| Location | · | | | · |
| Unit Letter <u>M</u> : B | 82.1 Feet From The Lin | • and | _ Feet From The | |
| | Township 2.4.5 Range | | | Cou |
| | | | | |
| III. DESIGNATION OF TRA | NSPORTER OF OIL AND NATURAL | GAS | | |
| Name of Authorized Trailesverer a Navara KEFINING | I OII 🔽 or Condensate 🛄 | 1 Andress / Give address 1 | o which approved copy of | this form is to be sent; M. 49BT.IC |
| MANAJO MERINING | Casinghead Gas or Dry Cas | Address (Cine address) | a which approved copy of | this form is to be sent) |
| None of Authorized Transporter of | | 400: PERICHOOX | bren Terse | 10762 |
| | Unit Sec. Twp. Rgs. | is gas actually connecte | | • |
| If well produces all or liquide, give location of tanks. | F 14 24 32 | yes | 1 | |
| If this production is commingle | i with that from any other lease or pool, | give commingling order | number: | · · · · · · · · · · · · · · · · · · · |
| NOTE: Complete Part: IV a | nd V on reverse side if necessary. | | | |
| VI. CERTIFICATE OF COMP | LIANCE | | DNSERVATION DIV | ISION |
| I hereby certify that the rules and regulations of the Oil Conservation Division have | | APPROVED | EB 1 0 1989 | |
| been complied with and that the information gives. 's true and complete to the best of my knowledge and belief. | | 1 | | RY SEXTON |
| | | · · · · · · · · · · · · · · · · · · · | ALASIAN LALISTAN | 1000 |

| Mai | k D. | Olie ke | | |
|-------------|------|---------|--|--|
| (Signature) | | | | |

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(Tuls) 2-9-87. (Date)

| APPROVED | FEB 1 0 1989 | | | |
|--|--|--|--|--|
| BYORIGINAL SIGNED BY JERRY SEXTOM 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 despe-well, this form must be accompanied by a tabulation of the devia-tests taken on the well in accordance with RULE 111.

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

Fill out only Soci one I. II. III, and VI for changes of own well name or number, or transporter, or other such change of condit

Separate Forms C-164 must be filed for each pool in mult: completed wells.

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