STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

DISTRIBUTIO	DM .		
FILE			
LAND OFFICE]	
TRANSPORTER	DIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I				
Operator				
Harris & Walton				
Address		•		
c/o Oil Reports & Gas Se	ervices, Inc., Box 755	, Hobbs, NM 8824	41	
Resson(s) for filing (Check proper box)		Other (Pleas	e explain)	
New Vell	Change in Transporter of:			
Recompletion		y Gas Ef:	fective May 1, 1990	
Change in Ownership	X Casinghead Gas Co	ondensate	•	
If change of ownership give name				
and address of previous owner			····	
	r (CE			
II. DESCRIPTION OF WELL AND L	Well No. Pool Name, Including F	ormation	Kind of Lease	Lease No.
Lease Name			SHAR TAKK SKF	
Charles Whitten "B"	3 Jalmat Yates	- <u>SR</u>		
Location				
Unit Letter H : 1650	Feet From The North Lin	• and <u>330</u>	Feet From TheEast_	
				6
Line of Section 4 Tawnsh	hip 245 Range	<u>36E</u> , NMPN	4, <u>Lea</u>	County
III. DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL	GAS		in in to be sent!
Name of Authorized Transporter of Cil X	or Condensate	Address (Give address	to which approved copy of this fo	
Shell Pipe Line Corp.		P. O. Box 2648	, Houston, TX 77000	
Name of Authorized Transporter of Casing	nead Gas C or Dry Gas	Address (Give address	to which approved copy of this fo	orm is to be sent?
Sid Richardson Carbon &		201 Main St.,	lst City Bank Tower,	Ft. Worth, T)
	hit Sec. Twp. Rge.	Is gas actually connect	ed? When	76102
If well produces oil or liquids, give location of tanks.	I 4 24S 36E	Yes	1955	
		in a second s	number:	
If this production is commingled with the	hat from any other lease or pool,	give comminging orde		
NOTE: Complete Parts IV and V of	n reverse side if necessary.			
NOIE: Complete l'unis 17 una 7 of		11		• •
VI. CERTIFICATE OF COMPLIANC	F		ONGERVATION DIVISIO	N
			оон т <u>Э</u> 1 АА	
I hereby certify that the rules and regulations	of the Oil Conservation Division have	APPROVED	STATED BY IEDBY CE	XTON 19
been complied with and that the information g	iven is true and complete to the best of		GINAL SIGNED BY JERRY SE	
my knowledge and belief.		BY	DISTRICT I SUPERVISOR	

1	. / .
1/i .	Nello
Unnul	L REPAR

	(Signature)	
	Agent	
	(Title)	
	6/12/90	
the second s		

(Date)

ROVED	UN 15 1990		9
	DRIGINAL SIGNED BY JERRY SE	TON	
	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 deepened well, this form must be accompanied by a tabulation of the deviation 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 multiply completed wells.