

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PERMITS OFFICE	

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

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator Dwight A. Tipton

Address c/o Oil Reports & Gas Services, Inc., P.O. Box 755, Hobbs, NM 88241

Reason(s) for filing (Check proper box)

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

Other (Please explain) Effective 7/1/88

If change of ownership give name and address of previous owner Graham Royalty Ltd., 5429 LBJ Fwy, Suite 550, Dallas, Texas 75240

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Leonard Federal</u>	Well No. <u>2</u>	Pool Name, including Formation <u>South Leonard Queen</u>	Kind of Lease <u>State, Federal or Fee Federal</u>	Lease No. <u>NM-7951</u>
Location				
Unit Letter <u>N</u>	<u>990</u>	Feet From The <u>South</u> Line and <u>2310</u>	Feet From The <u>West</u>	
Line of Section <u>11</u>	Township <u>26 S</u>	Range <u>37 E</u>	<u>NMPM</u>	County <u>Lea</u>

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Permian</u>	Address (Give address to which approved copy of this form is to be sent) <u>P. O. Box 1183, Houston, Texas 77251-1183</u>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit <u>J</u> Sec. <u>11</u> Twp. <u>26S</u> Rge. <u>37E</u>
Is gas actually connected?	When
<u>No</u>	

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

Hanna Haller
(Signature)
Agent
(Title)
7/21/88
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____
BY ORIGINAL
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 conditions.
Separate Forms C-104 must be filed for each pool in multiple completed wells.