STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE			
FILE			
U.S.O.A.			
LAND OFFICE			
TRANSPORTER	OIL	\coprod	
	GAB		
PERATOR			
PROBATION 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

Separate Forms C-104 must be filed for each pool in multip completed wells.

REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
Operator			
Ambett Oil Company, Inc.			
Address			
c/o Oil Reports & Gas Services, Inc., P.O. Box 755, Hobbs, NM 88241			
Reason(s) for filing (Check proper box) New Well Change in Transporter of:			
[] (400 a.s.)	y Gas Effectiver 8/1/85		
	ondensate		
If change of ownership give name W. K. Byrom, Box 147, Hobbs, NM 88241 and address of previous owner W. K. Byrom, Box 147, Hobbs, NM 88241			
II. DESCRIPTION OF WELL AND LEASE	ormation Kind of Lease Lease No		
Fage lique	State Federal of Fee Dan		
Buffington 2 Langlie Mattix	TCC J		
Location Linut Letter M : 660 Feet From The South Line and 660 Feet From The West			
Unit Letter P1 : 000 Feet From The Boats Line and			
Line of Section 19 Township 25S Range	38E , NMPM, Lea County		
Name of Authorized Transporter of CII XX or Condensate Texas New Mexico Pipe Line Company Name of Authorized Transporter of Casinghead Gas XX or Dry Gas El Paso Natural Gas Company If well produces oil or liquids, que location of tanks. L 19 258 38E	P. O. Box 2528, Hobbs, NM 88241 Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, E1 Paso, Texas 79978 Is gas actually connected? Yes 10/25/55		
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.			
	OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE	SEP 2 7 1985 19		
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	APPROVED		
my knowledge and belief.	BY INGINAL SIGNAL BY JETRY SEXTON		
	TITLE DIPERVISOR		
	This form is to be filed in compliance with RULE 1104.		
Manage 1 alle 1 to the is a request for allowable for a newly drilled or de			
(Signature) well, this form must be accompanied by a tabulation of the deviate tests taken on the well in accordance with MULE 111.			
Agent	All sections of this form must be filled out completely for allo-		
(Title)	able on new and recompleted wells.		
8/2/85 (Date)	Fill out only Sections I, II, III, and VI for changes of owne well name or number, or transporter, or other such change of condition		