

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION 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
Tahoe Energy, Inc.

Address
4402 West Industrial - Midland, Texas 79703

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas	Other (Please explain) Change Operator Name Tahoe Energy, Inc. 4402 West Industrial-Midland, Tx. 79703
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas		

If change of ownership give name and address of previous owner
Tahoe Oil & Cattle Company

II. DESCRIPTION OF WELL AND LEASE

Lease Name Wimberly	Well No. 4	Pool Name, including Formation Triple X Delaware	Kind of Lease State, Federal or Fee Federal	Lease No. NMO2889
Location				
Unit Letter G	1980	Feet From The North	Line and 1650	Feet From The East
Line of Section 12	Township 24-S	Range 32-E	NMPM, Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Conoco Inc. <i>Surface Trans</i>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1959 - Midland, Tx. 79702
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Corporation <i>66 Natl. Gas</i>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 5050 - Bartsville, OK. 74004
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. H 12 24-S 32-E
Is gas actually connected?	When Yes N/A

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.

(X) *J. A. Arriaga*
(Signature)
President
(Title)
DEC. 0 1 1987
(Date)

OIL CONSERVATION DIVISION

DEC. 3 1987

APPROVED _____, 19

BY _____ ORIGINAL SIGNED BY JERRY SEXTON

TITLE _____ DISTRICT I SUPERVISOR

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.