For an				
the second s				
STATE OF NEW MEXICO		•		
ENERGY AND MINERALS DEPART	MENT		Form (
				d 10-01-78
OIL CONSERVATION DIVISION		IN .	08-01-83	
SANTA FE			Page 1	
FILE	P. O. BOX 2088			
U.S.G.S.	SANTA FE, NEW	MEXICO 87501		
LAND OFFICE				
TRANSPORTER GAS	TRANSPORTER In			
OPERATOR		ND	• .	
PRORATION OFFICE				•
I.	AUTHORIZATION TO TRANSF	PURTUIL AND NATU	KAL GAS	
Operator	••••••••••••••••••••••••••••••••••••••			
Saha Prorey Tro				
Saba Energy Inc.				
	11 - 1 mm 30300			
508 Parkwood Dr., Mi	Idland, TX /9/03			
Reeson(s) for filing (Check prope		Other (Please	ezplain)	
New Well	Change in Transporter of:			
Recompletion		y Gas Effecti	ve Date 6-1-85	
X Change in Ownership	Casinghead Gas Co	ondensate		
If change of ownership give nat		Box 68. Hobbs. N	M 88241	
and address of previous owner.				
II. DESCRIPTION OF WELL	AND LEASE			NM-036249
Lease Name	Well No. Pool Name, Including Fo	ormation	Kind of Lease	Lease No.
Cortland Myora Unit	1 Langlie Mattix	_	State, Federal or Fee Trad	
Cortland Myers Unit	I Langlie Mattix	<u> </u>	State, Federal of Fee Fed	Above
	1000	1000		
Unit Letter K :;	1980 Feet From The South Line	• and1980	_ Feet From The WEST	
· · · · · · · · · · · · · · · · · · ·	· · ·			
Line of Section 22	Township 245 Range	<u>37E</u> , NMPM	Lea	County
		· · · · · ·		
III. DESIGNATION OF TRA	NSPORTER OF OIL AND NATURAL	GAS		
Name of Authorized Transporter o	f Oll 🙀 or Condensate 🗌	Address (Give address 1	o which approved copy of this form	is to be sent)
Texas New Mexico Pip	eline Co.	P. 0 Box 2528	Hobbs NM 88241	
Name of Authorized Transporter o	f Casinghead Gas or Dry Gas	Address (Give address t	. Hobbs, NM 88241 o which approved copy of this form	is to be sent)
F1 Page Natural Cas	<u> </u>	P 0 Por 1/02	F1 Baco TV 70001	
<u>El Paso Natural Gas</u>	Unit Sec. Twp. Rge.	P. O. Box 1492, El Paso, TX 79901 Is gas actually connected? When		
If well produces oil or liquids, give location of tanks.		1		
	N 22 24 37	Yes	Oct. 1954	
If this production is commingle	d with that from any other lease or pool, j	give commingling order	number:	
NOTE: Complete Parts IV a	nd V on reverse side if necessary.			········
VI. CERTIFICATE OF COMP	LIANCE	OIL CONSERVATION DIVISION		
I herebu certify that the sister and an	allations of the Oil Conservation Division have		JCH - A 1982	•
	rulations of the Oil Conservation Division have mation given is true and complete to the best of	APPROVED		
my knowledge and belief.	Bren a nee and complete to the best of	OR OR	I GINAL SIGNED BY JERRY SI	EXTON
		~	BISTRICT I SUPERVISOR	

H

(Signature)

(Title)

(Date)

Agent

7-26-85

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 AULE 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.