

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format (06-01-83)
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U.S.O.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Tahoe Energy, Inc.	
Address 4402 West Industrial - Midland, Texas 79703	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change Operator Name: Tahoe Energy, Inc. 4402 West Industrial-Midland, Tx. 79703
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> casinghead Gas	<input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Ramsey State	Well No. 1	Pool Name, including Formation Langlie-Mattix <i>The Br. B.B.</i>	Kind of Lease State, Federal or Fee	State	Lease No. B-1732
Location Unit Letter <u>E</u> : <u>660</u> Feet From The <u>West</u> Line and <u>1980</u> Feet From The <u>North</u>					
Line of Section <u>36</u> Township <u>24-S</u> Range <u>37-E</u> , NMPM, <u>Lea</u> County					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1510 Midland, Texas 79702	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492 El Paso, Texas	
If well produces oil or liquids, give location of tanks.	Unit <u>E</u>	Sec. <u>36</u>
	Twp. <u>24-S</u>	Rge. <u>37-E</u>
Is gas actually connected?		When
Yes		4-1-55

If this production is commingled with that from any other lease or pool, give commingling order number: No

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. Freeman*
(Signature)
President
(Title)
DEC. 3 1987
(Date)

OIL CONSERVATION DIVISION
APPROVED DEC 3 1987, 19____
BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 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.

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