

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

| | |
|------------------------|-----|
| PA. 37 CARPES RECEIVED | |
| DISTRIBUTION | |
| SANTA FE | |
| FILE | |
| U.S.O.S. | |
| 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 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator

Federal Deposit Insurance Corp.

Address
P. O. Box 3148, Midland, Texas 79702

Reason(s) for filing (Check proper box)

☐ New Well ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas

☐ Recompletion ☐ Casinghead Gas ☐ Condensate

☒ Change in Ownership

Other (Please explain)

Operator
If change of ownership give name and address of previous owner Meyers and Associates, Inc.

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--------------------------------|---------------|--|--|--------------------|
| Lease Name Sitting Bull "A" | Well No. 1 | Pool Name, including Formation Sioux Yates - Tansill SR | Kind of Lease State, Federal or Fee State | Lease No. L-114 |
|--------------------------------|---------------|--|--|--------------------|

Location
Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West

Line of Section 32 Township 25-S Range 36-E, NMPM, Lea 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"/> Tesoro Crude | Address (Give address to which approved copy of this form is to be sent) 8700 Tesoro, San Antonio, Tx. 78286 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492, El Paso, Texas 79978 |

| | | | | | | |
|--|-----------|------------|-------------|-------------|-----------------------------------|----------------|
| If well produces oil or liquids, give location of tanks. | Unit F | Sec. 22 | Twp. 26S | Rge. 36E | Is gas actually connected? Yes | When 6-5-79 |
|--|-----------|------------|-------------|-------------|-----------------------------------|----------------|

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.

A. W. Irish
(Signature)
Section Chief of Oil & Gas Property Mgt.
(Title)
9-19-84
(Date)

OIL CONSERVATION DIVISION
SEP 26 1984

APPROVED _____
BY _____ ORIGINAL SIGNED BY _____
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.