Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

### SACHAS CEMENT SOCIETY ### SACHAS CONTROL SOCIETY #	I.	7	TO TRAN	NSPC	DRT OI	_ AND NA	TURAL GA	AS					
Address Control Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241	Operator							Well	API No.				
Content Cont		30-025-26527											
Remotion for Tilling (Enkeld propers has) New Wall Recompletion Oil Change in Transporter of Recompletion Caulinghead Gist Dry Case Effective 11/1/91 If change of operator give name acknown operator II. DESCRIPTION OF PELL AND LEASE Lass Name W. F. Hannagan Lossion Unit Letter N													
New York		<u>Service</u>	s, Inc.	, Bo	x 755								
Recompletions			Change in T	`ranenor	ter of:			ain)					
Casing in Operator Casingheed Gas Condemnate							Effective	ve 11/1,	/91				
Manage of operator give name and adultate of provision operator	l . —			-									
THE PROPERTY OF WELL AND LEASE Lease Name W. P. Harnagan Well No. 760 Name, Including Formation Will Lease Name W. P. Harnagan Well No. 760 Name, Including Formation Will Lease Name W. P. Harnagan W. P. Harnagan Well No. 760 Feet From The West Line Section 12 Township 255 Range 36E NMPM Lea County Hill. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorised Transporter of Oil O'Condensite Address (Give address to which approved copy of this form is to be sent) P. O. BOX 2528. Holber. NN B836 Print is to be sent) TEXES New Mexico Pipe Line Company P. O. BOX 2528. Holber. NN B836 Print is to be sent) Sid Richardson Carbon & Gasoline Co. If well production is cliniquist, with that from any other lease or pool, give comminging order number: W. COMPLETTON DATA Designate Type of Completion (X) Designate Type of Completion (X) Well New Yell Wockover Deepen Plug Back Same Rev Diff Natv Designate Type of Completion (X) Name of Producing Formation TOP Oll/Gas Fry Tubing Descent HOLE SIZE CASING A TUBING SIZE DEPTH SET SACKS CEMENT Olice First New Oil Run To Teal Date of Teal Producing Method (Firon, pump, past lift, etc.) P. Date of Teal Producing Method (Firon, pump, past lift, etc.) Olice First New Oil Run To Teal Date of Teal Cash Well P. Orig. Signates Olice Completes to be be at of my browledge and bellef. Date of Teal Producing Method (Firon, pump, past lift, etc.) Olice Conservation Divide how been complete with and that the information given above is true and only the name and producing of the subset of th												_	
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DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS													
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INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.