## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

**. ** ***** **	4410	1		
DISTRIBUT	1	7		
SANTA PE			1	_
FILE			1	_
U.E.D.A.		1	_	
LAND OFFICE	1-	1		
TRANSPORTER	OIL			Ì
	GAS			Ì
OPERATOR				
PROBATION OF			1	

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

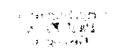
Form C-104 Revised 10-01-78 Formal 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1.		····						
Sirgo-Operatin	ng, Inc.							
Address		<del></del>						
P.O. Box 3531,	Midlan	d, Texa	s 79702					
Reason(s) for filing (Check proper box)				Other (Please explain)				
Hew Aell		Change in Transporter of: Change operator name from Sirgo-Collie						
Recompletion			<b>&gt;=</b> ≪	Dry Gas Inc. to Sirgo Operating, Inc. effective				
A Change in Ownership	<del></del>	Casingl	nead Gas (	Condensate	Novembe	r 1, 1988.		
f change of ownership give no and address of previous ownership	Sirg	o-Colli	er, Inc., P.(	D. Box 3	531, Mid	land, Texas 79702		
I. DESCRIPTION OF WELL	ANDIF	ASE						
Legae Name West Dollar			ool Name, Including I	ormation		Kind of Lease	Lease No.	
Queen Sand Unit	1	66	Dollarhide (	)ueen		State, Federal or Fee State	B-9613	
Location			·	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>		
Unit Letter D	1200	Feet From	rh. North Li	ne and 12	50	Feel From The West		
				•				
Line of Section 32	Township	24S -	Range	38E	, NMPM	. Lea	County	
U DESIGNATION OF TO	4 3 7 C D C D C	rn on on						
II. DESIGNATION OF TRA	INSPORT		AND NATURA	L GAS	Give address s	o which approved copy of this form	is to be seed	
· ·	Water S			,		- Lines opproved copy of this form	10 be sent/	
Name of Authorized Transporter	of Casinghed	d Gas	or Dry Gas	Address (	Cive address t	o which approved copy of this form	is to be sent)	
	Water S	upply We	e11				·	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp. Rgs.	ls gas act	ually connecte	d7 When	<del>*************************************</del>	
this production is commingle	d with thet	from any o	ther lease or pool,	give commi	ingling order	numberi		
NOTE: Complete Parts IV	ind V on r	everse side	if necessary.					
1. CERTIFICATE OF COMP	LIANCE				OIL C	DINSERVATION DIVISION		
hereby certify that the rules and reg	sulations of t	he Oil Conse	rvation Division have	APPRO	VED	JAN & U 1000		
con complied with and that the inforce y knowledge and belief.	mation given	is true and co	omplete to the best of			Orion Siamo i La	5	
,				BY		Orig. Signed by Paul Kantz		
	Λ.			TITLE.				
L	/ <del>}</del> }_	4		701	· form le to	be filed in compliance with RU		
Donne		ulu		1		set for allowable for a newly dr		
Agent	(enclure)			well, thi	s form must on on the w	be accompanied by a tabulation ell in accordance with MULE	n of the deviation	
(Title) October 12, 1988			All sections of this form must be filled out completely for allowable on new and recompleted wells.					
	(Date)	····		Fill well nam	out only Se or number,	ections 1. II. III, and VI for choor transporter, or other such cha	sanges of owner, inge of condition.	

Separate Forms C-104 must be filed for each pool in multiply completed wells.





RECEIVE

NOV 1 1988

HOBBS OFFICE