

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
FILE	
U.S.O.A.	
LAND OFFICE	
TRANSPORTER	☐ OIL ☐ GAS
OPERATOR	
PROBATION OFFICE	

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

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OCT 28 1991
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. **Operator**
ENERDYNE CORPORATION

Address
Post Office Box 502, Albuquerque, N.M. 87103

Reason(s) for filing (Check proper box)

☐ New Well	☐ Change in Transporter oil	Other (Please explain)
☐ Recombination	☐ Oil	
☒ Change in Ownership	☐ Gashead Gas ☐ Dry Gas ☐ Condensate	

If change of ownership give name and address of previous owner: BRANA CORPORATION, 320 Gold Ave., SW, #1223, Albuquerque, NM 87102

II. DESCRIPTION OF WELL AND LEASE

Lease Name SANTA FE Pacific	Well No., Pool Name, including Formation 103 Chaco Wash- MV	Kind of Lease State, Federal or Fee FEE	Lease No.
Location Unit Letter P : 165 Feet From The South Line and 165 Feet From The East Line of Section 21 Township 20 North Range 9 West N.M.P.M. McKinley County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Gary Energy Corporation	Address (Give address to which approved copy of this form is to be sent) Box 159, Bloomfield, NM 87413
Name of Authorized Transporter of Gashead Gas ☐ or Dry Gas ☐ NA	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit : P , Sec. : 21 , Twp. : 20N , Rge. : 9W , Is gas actually connected? : N/A , when

If this production is commingled with that from any other lease or pool, give commingling order numbers

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

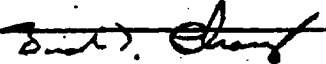
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.


(Signature)
DON L. HANOSH, PRESIDENT
(Title)
10/25/91
(Date)

OIL CONSERVATION DIVISION

OCT 28 1991

APPROVED _____, 19__

BY  _____

TITLE **SUPERVISOR DISTRICT 73**

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 filled for each pool in multiply completed wells.