

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

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U.S.G.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PROMOTION OFFICE	

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Basin Fuels, Limited  
Address  
Suite 300, 300 W. Arrington

Reason(s) for filing (Check proper box)  
 New Well  
 Recompletion  
 Change in Ownership  
 Change in Transporter of:  
 Oil  
 Casinghead Gas  
 Dry Gas  
 Condensate  
 Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Noo Navajo	Well No. 2	Pool Name, including Formation Franciscan Lake MV	Kind of Lease State, Federal or Fee	Navajo NOO-C-14-20-4402	Lease No.
Location Unit Letter <u>B</u> : <u>330</u> Feet From The <u>North</u> Line and <u>1750</u> Feet From The <u>East</u> Line of Section <u>13</u> Township <u>20N</u> Range <u>6W</u> , NMPM, <u>McKinley</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"/> Conoco, Inc. <i>Surface Trans</i>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1429, Bloomfield, NM 87413				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 A	Sec. 13	Twp. 20N	Rge. 6W	Is gas actually connected? When

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.

BASIN FUELS, LIMITED

Agent *Doris Fraka*  
(Signature)  
11/30/84  
(Date)

OIL CONSERVATION DIVISION

APPROVED *Frank J. [Signature]*, 19 \_\_\_\_\_  
BY \_\_\_\_\_  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 110A.  
If this is a request for allowable for a newly drilled or deepens well, this form must be accompanied by a tabulation of the deviatit tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allow able 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 conditior  
Separate Forms C-104 must be filed for each pool in multipl completed wells.