STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

PO. OF 1 / PIED DESCIVED			
DISTRIBUTION			
SANTA FE		1	
FILE		<u> </u>	
V.1.0.1,			
LAND DFFICE		-	
TRANSPORTER	OIL		
THE STATE OF THE S	BAS		
OPERATOR			
PROBATION OFFICE			

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

Operatel		5 (201 Salada (1.00 S S 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Basin Fuels Limited			
Address		•	: :
P.O. Box 50, Farmington, NM 87499			
Researls) for tiling (Check proper box)	Other (Please explain)		
New Well Change in Transporter als		er en	
	y Gas		
Change in Ownership Casinghead Gas Ca	onden#ate		
f change of ownership give name nd address of previous owner			
1. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including F	ormation	Kind of I case	Lease No.
Cana traus		State, Federal or Fee Noo-C-1	4-20-4402
Noo Navajo 2 Franciscan La	ake m		
Location North	1750	Feet From The East	
Unii Leiler B : 330 Feel From The North Lin	• and		
13 Taymehla 20N Ronge	6W , NMPA	McKinley	County
Line of Section 13 Township 20N Range			•
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	. GAS		is to be sent!
Name of Authorized Transporter of Oil (3) or Condensate	1	to which approved copy of this form	
	P.O. Box 1429	, Bloomfield, NM 8741	is in he sent!
CONOCO INC. Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address	to which approved copy of this form	
Maur of Various Ave.			
Unit Sec. Twp. Rgs.	Is que actually connec	ted? When	
If well produces oil or liquids, give location of tanks. B 13 20N 6W			
I this production is commingled with that from any other lease or pool,	give commingling orde	et numberi	
		••.	
NOTE: Complete Parts IV and V on reverse side if necessary.			•
	OIL CONSERVATION DIVISION		
VI. CERTIFICATE OF COMPLIANCE		nro. 4 /	7
hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED		es de
peen complied with and that the information given is true and complete to the best of	50-1111		
ny knowledge and belief.	BY	40 L 30 L	下铲草
	TITLE		
\sim	This form is to be filed in compliance with RULE 1104.		
Meaning hornell.	I a see attenuable for a newly drilled or deepens		
(Signature)	ll	to accompanied by a labulation well in accordance with MULK	11 01 1111-
Production Clerk	All medians of	this form must be filled out com	pletely for allow
(Title)	All sections of this form must be filled out completely for allow able on new and recompleted wells.		
12/11/87	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 multiple		
(Date)			
·	Separate Form completed walls.	E C-104 Bidet he illed in seen	,
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