STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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LAMO 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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.				
Geo Engineering, Inc.				
RO. Box 2966, Santa Fe, New Mexico 87501				
Reason(s) for filing (Check proper box) Change in Transporter of:	Other (Please explain) DE Control of the Control of			
Change in Ownership Casinghead Gas Co	ondensate JUN 1 8 1987			
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE DIST. 3				
State Well No. Pool Name, Including F 13 Chaco Wa				
Unit Letter B; GGO Feet From The North Line and 1650 Feet From The Eqs +				
Line of Section 28 Township 20 North Range 9 West, NMPM, County				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of OIL & or Condensate Address (Give address to which approved copy of this form is to be sent) The Permian Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent)				
TSTM				
If well produces oil or liquids, give location of tanks. Unit Sec. Twp. Rqs. B 28 20 N 9 W	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	OIL CONSERVATION DIVISION			
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.	By Trunk . Savey			
	TITLE SUPERVISOR DISTRICV 先 3			
Petroleum Engineer	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.			
June 7, 1984	All sections of this form must be filled out completely for allowable on new and recompleted wells.			
(Date)	Fill out only Sections I. II. III, and VI for changes of counter, well name or number, or transporter, or other such change of condition.			
	Separate Forms C-104 must be flied for each pool in multiply completed wells.			