STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

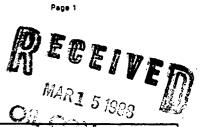
(Date)

. ** 10** ***			
DISTRIBUTION			
SANTA FE		Γ	
FILE			
U.1.0.1.			
LAND OFFICE			
TRANSPORTER	OIL		
	BAD		
OPERATOR			
PROBATION OFFICE			

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

Form C-104 Revised 10-01-78 Format 06-01-83

well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.



REQUEST FOR ALLOWABLE

OPERATOR	1A	ND		MAD_{\bullet} .	
PROBATION OFFICE	AUTHORIZATION TO TRANSF	PORT OIL AND NATU	RAL GAS	MARI 5	1993
Coperator	· · · · · · · · · · · · · · · · · · ·				Pa
BACA PETROLEUM COR	P.		•		
Address					
1099 - 18th Street	, Ste. 2950, Denve	er, CO 80202			
Reason(s) for filing (Check proper box)		Other (Please	explain)		
New Well	Change in Transporter of:	CHANGI	·	D	
Recompletion	A	1	E OF OPERATO	R	
Change in Ownership	Castnahead Gas Co	ondensate			
If change of ownership give name	APITAL OIL & GAS (CORPORATION.	P. O. Box 2	130. Kil	gore, TX
and address of previous owner	APITAL OIL & GAS (CONTONATION		75662	
II. DESCRIPTION OF WELL AND LE	: A S D			. • • • •	
Lease Name	Well No. Pool Name, Including Fo		Kind of Lease		Lease No.
S.F.P.R.R.	18 Miguel Creek	-Gallup	State, Federal or Fee	Fee	09735
Location	P	3.7			
Unit Letter P : 440	Feet From The DUTH Lin	• and <u>330 </u>	_ Feet From The £	AST	
10					_
Line of Section 20 Township	P 16 North Range 6	West . NMPM	<u> McKinley</u>		County
III DECICALATION OF TRANSPORT	ere of AND MATTIRAL	CAS			
Name of Authorized Transporter of Oll	or Condensate	Addiess (Give address	to which approved copy	of this form is to	o be sent)
Gary Energy Corpor	ration	Bloomfiel	d, New Mexic	0 87413	
Name of Authorized Transporter of Casingne	ad Gas or Dry Gas	Address (Give address	to which approved copy	of this form is to	o be sent)
N/A					
If well produces oil or liquids, Unit		is gas actually connect	ed?	وأراد والمعجادة	
give location of tanks.	4:29:16N:6W	<u> </u>		,	
If this production is commingled with the	at from any other lease or pool,	give commingling orde	r number:		
NOTE: Complete Parts IV and V on	reverse side if necessary.		• •		
NOTE. Complete land it and to	reserve size y weekery.	11 04 0	ONGEDVATICA E		
VI. CERTIFICATE OF COMPLIANCE	•	UIL U	ONSERVATION C	KAISION N	
I hereby certify that the rules and regulations of	the Oil Conservation Division have	APPROVED	MIMIN I D 150	 .	19
been complied with and that the information give	en is true and complete to the best of	1	· 1) Olim		
my knowledge and belief.	;	8Y			
		TITLE SUP	ERVISION DIST	RICT#3	
Or a sul out		This form is to	he filed in complian	nce with BULS	r 1104.
This form is to be filed in compliance with RULE 1104. If this is a request for allowable for a newly drilled or deepens					
(Signature) well, this form must be accompanied by a tabulation of the deviati				f the deviation	
ALPH R. WILKERSON VICE PRESPRODUCTION tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allo					
(Title) able on new and recompleted wells.					way for allow-
MARCH 7, 1988		1	Sections I. II. III. ar	nd VI for char	ges of owner.