STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

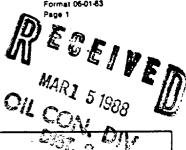
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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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



If change of ownership give name CAPITAL OIL & GAS CORPORATION, P. O. Box 2130, Kilgore, TX
BACA PETROLEUM CORP. Address 1099 - 18th Street, Ste. 2950, Denver, CO 80202 Recoon(s) for filing (Check proper box) New Well Recompletion Change in Transporter of: Dry Gas CHANGE OF OPERATOR (I change of ownership give name CAPITAL OIL & GAS CORPORATION, P. O. Box 2130, Kilgore, TX
Address 1099 - 18th Street, Ste. 2950, Denver, CO 80202 Reason(s) for filing (Check proper box) New Well Recompletion Change in Transporter of: Other (Please explain) CHANGE OF OPERATOR Change in Ownership Casinghead Gas Condensate If change of ownership give name CAPITAL OIL & GAS CORPORATION, P. O. Box 2130, Kilgore, TX
1099 - 18th Street, Ste. 2950, Denver, CO 80202 Recon(s) for filing (Check proper box) New Well Change in Transporter of: Recompletion Change in Transporter of: Change in Operation Change in Ownership Casinghead Gas Change of ownership give name CAPITAL OIL & GAS CORPORATION, P. O. Box 2130, Kilgore, To
Recoon(s) for filing (Check proper box) New Well Recompletion Recompletion Change in Transporter of: Dry Gas CHANGE OF OPERATOR Change of ownership give name CAPITAL OIL & GAS CORPORATION, P. O. Box 2130, Kilgore, TX
Change in Transporter of: New Well
Recompletion Change in Ownership Casinghead Gas Change of Operation Casinghead Gas Condensate Change of ownership give name Capital Oli & GAS CORPORATION, P. O. Box 2130, Kilgore, To
Change in Ownership Casinghead Gas Condensate Captral, Ott. & GAS CORPORATION, P. O. Box 2130, Kilgore, To
(CAPITAL OIL & GAS CORPORATION, P. O. Box 2130, Kilgore, To
If change of ownership give name CAPITAL OIL & GAS CORPORATION, P. O. Box 2130, Kilgore, Tand address of previous owner
and address of previous owner
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Company Company
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S.F.P.R.R. Miguel Creek-Gallup State, Action of the Miguel Creek-Gallup
Location (Marcot
Unit Letter L: 23/0 Feet From The SUTH Line and 990 Feet From The WEST
County
Line of Section 2/ Township 16 North Range 6 West NMPM, McKinley County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Oil XX or Condensate
Gary Energy Corporation Bloomfield, New Mexico 87413 Bloomfield, New Mexico 87413
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)
N/A
Unit Sec. Twp. Rgs. / Is gas actually connected? when
If well produces oil or liquids, give location of tanks. L 21 /6N:6W
the loss of sold give commingling order number:
If this production is commingled with that from any other lesse or pool, give commingling order number:

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.

Gelpl Q. Wilkers

RALPH R. WILKERSON VICE PRES.-PRODUCTION

(Title)

MARCH 7, 1988

(Date)

OIL CONSERVATION DIVISION

MAR 15 1988

TITLE SUPERVISION DISTRICT # 5

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 filed for each pool in multiply completed wells.