

RECEIVED

JUN 3 1990

OIL CON. DIV.
DIST. 3

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

| | | |
|------------------------|-----|--|
| NO. OF COPIES RECEIVED | | |
| DISTRIBUTION | | |
| SANTA FE | | |
| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PROMOTION 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.

Operator
GURLEY OIL COMPANY

Address
P.O. Box 2092 - FARMINGTON, NM 87499

Reason(s) for filing (Check proper box)

| | | |
|--|---|---|
| <input type="checkbox"/> New Well | Change in Transporter of: | Other (Please explain) EFFECTIVE JULY 1, 1990 |
| <input type="checkbox"/> Recompletion | <input checked="" type="checkbox"/> Oil | |
| <input type="checkbox"/> Change in Ownership | <input type="checkbox"/> Casinghead Gas | |
| | <input type="checkbox"/> Dry Gas | |
| | <input type="checkbox"/> Condensate | |

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------------|--|--------------------------------|-----------------------------------|
| Lease Name Salazar Navajocito | Well No. 1 | Pool Name, including Formation Nose Rock-Hospah Ext. | Kind of Lease Indian | Lease No. NOG 8612-1101 |
| State, Federal or Fee federal | | | | |
| Location Unit Letter M ; 330 Feet From The South Line and 330 Feet From The West Line of Section 10 Township 20N Range 12W , NMPM, McKinley 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"/> Giant Refining Company | Address (Give address to which approved copy of this form is to be sent) P.O. Box 256-Farmington, NM 87499 |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> NONE | 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 M Sec. 10 Twp. 20N Rge. 12W | Is gas actually connected? no 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.

Mike Maloney
(Signature)
Manager
(Title)
June 6, 1990
(Date)

OIL CONSERVATION DIVISION

APPROVED **JUN 18 1990**, 19____
BY **Original Signed by FRANK T. CHAVEZ**
SUPERVISOR DISTRICT # **8**
TITLE _____

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.