STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTE	0#	$\neg \tau$
SANTA FE		
FILE	i	
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	T
	GAS	
OPERATOR		\Box
PROBATION OFF	HCE	\Box

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

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



TRANSPORTER	GAS	-	_			_					U		T 44 4 (F)	3 1
OPERATOR			\dashv			H	REQUEST FO	JR ALLOY	VABLE		•	.1116	! 1	:
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Operator													OT V. LAIL	
DA	VE M	[. T]	HOM	AS, JR.								DI;	ST. 3	•
Address														
Р.	O. P	ox :	2026	6. Farm	nington	. New	Mexico 8	37499						
Reason(s) for fi					i i i i i j	, IICW	TICKICO (77477	Other (Plea	se exp	lain)			
New Well	•				Change is	n Transpo	rter of:							
Recompletion	on .							Dry Gas	Pool	Nomo	Chanas			
Change in C		hip			☐ c	nghead G	7	Condensate	1001	Name	Change			
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nd address of	previo	US 01	wner						 					
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I. DESCRIPTI	ION C	Jr W	ELL	AND L		Pool Na	me, including	Formation						Contract
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Location	C. A	paci			1	WEST	Lindrith	Garrup-	ракота				Apache	412
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Unit Letter_	<u> </u>		_ :	330	_Feet Fro	m The	North	ne and2	2310	F•	et From Th	·•W	lest	
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Line of Secti	on	16		Townshi	p 23N		Range	<u>3W</u>	, NMP	м,	Rio A	rriba	<u> </u>	County
w projekti	~~~		~~											
II. DESIGNA									76:		/.1	7	-7:1:::-7	
Name of Authors	_				or C	ondensate	' 🗀						of this form is t	•
Giant								P.O.	Box 256,	Fari	nington	, New	Mexico 8	7499
Name of Authors	zed Tr	anspo	orter :	of Casingn	ead Gas [] , or Dr	y Gas 🗔	Address	(Give address	r to whi	ich approve	d copy	of this form is t	o be sentj
El Pas	o Na	tura	$\frac{1}{2}$	Gas Com	pany			P.O.	Box 990,	Farr	nington	, New	Mexico 8	7499
If well produces			ds,	Uni	•		1	Is gas as	rually connec	ted?	When			
give location of				<u> </u>	$\frac{C}{1}$) ; 2:	3N 3W	1			<u>`</u>			
this production	on is c	comm:	ingle	d with th	et from en	y other I	esse or pool	give com	mingling orde	er num	ber:			
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NOTE: Com	pieie	r uris	11 2	1714 Y 1971	reverse s	iae ij ne	etessury.							
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				-				TITLE	<u>.</u>		SUPERVISOR	R DISTRI	CT # 3	
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121	1571	pre-	<u> </u>	1) // 1	100			II	this is a rec	quest f	or allowat	ole for	a newly drill-	ed or despensed
_	0		۱۰					tests t	nis form mus sken on the	well !	iccompanii In accorda	ince wi	i tabulation o ith AULE 111	f the deviation
Dewayne	<u>e Bla</u>	ance	tt/		tion Su	perint	tendent_	11						italy for allow-
				(Title)				able or	new and re	compl	eted well	s.		
		Ju	ne_	12. 19	84		······································	Fi	ll out only	Sectio	ns I, II,	III, and	VI for chan	ges of owner,
				(Date)				ii well ne	me or numbe	er, or to	ranaporter.	or other	er auch chang	e of condition

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.