STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT	
10. or (orice necession)	Form C-104
	Revised 19-01-78 Format 08-01-83
SANTA FE OIL CONSER	VATION DIVISION Page 1
P. O.	BOX 2088
U.S.O.S. SANTA FE, N	EW MEXICO 87501
LAND OFFICE	
TRANSPORTER GAS REQUEST	FOR ALLOWABLE AND UNSPORT OIL AND NATURAL CO.
PROBATION OFFICE	AND 04 1984 101
AUTHORIZATION TO TRA	AND ON THE MAR 3 0 1384 WISPORT OIL AND NATURAL GAS CON.
l.	DIV. DU.
-	0/ST 3 0/V.
EPX Company	
Address	
Box 4289, Farmington, New Mexico 87499	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	Omer (Prease explain)
Recompistion X Oil	1 n a
	Dry Gas
Change in Ownership Casinghead Gas	Condensate
II. DESCRIPTION OF WELL AND LEASE  Lease Name Well No. Pool Name, Include  Jicarilla Joint Venture KI 10 Chacon Da	Kota Associated XXXX Federal XXXX Jic. Apac
Location	The state of the s
Unit Letter L: 1850 Feet From The South	Line and 790 Feet From The West
Line of Section 3 Township 23N Range	ЗW , ммрм, Rio Arriba со
III DESIGNATION OF TRANSPORTER OF OR AND MATERIAL	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATU	
Rame of Ratharized Transporter of On Ed Condensate	Address (Give address to which approved copy of this form is to be sent)
Giant Refining Company Name of Authorszed Transporter of Casinghead Gas or Dry Gas	Box 256, Farmington, New Mexico 87401 Address (Give address to which approved copy of this form is to be sent)
El Paso Natural Gas Company	Box 4289, Farmington, New Mexico 87499
Illatt See Tue Bee	Is gas actually connected? When
If well produces oil or liquids, L 3 23N 3	•
, L , J , Z JIV , J	· · · · · · · · · · · · · · · · · · ·
If this production is commingled with that from any other lease or p	ool, 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 I	APPROVED MAR 30 1984
been complied with and that the information given is true and complete to the be	
my knowledge and belief.	BY TO
	Styll Street
D le le .	TITLE SUPERVISOR DISTRICT # 3
/// // // // // // // // // // // // //	This form is to be filed in compliance with any F area

(Signature)

(Title)

(Date)

Drilling Clerk

If this is a request for allowable for a newly drilled or deepe well, this form must be accompanied by a tabulation of the deviatests taken on the well in accordance with AULE 111.

All sections of this form must be filled out completely for all able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owr well name or number, or transporter, or other such change of condit

Separate Forms C-104 must be filed for each pool in multi-completed wells.

Designate Type of Comple	tion = (X)	Gas Well	New Weil	Workover	Deepen	Plug Back	Same Restv.	Diff. Res
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		<u> </u>
Elevations (DF, RKB, RT, GR, etc.	Name of Producing Formation		Top Oll/Gas Pay			Tubing Depth		
Performiona		<u> </u>			Depth Casing Shoe			
	TUBING,	CASING, AN	CEMENT!	NG RECORD	,			<del></del>
HOLE SIZE	CASING & TUB			DEPTH SE		SACKS CEMENT		
			+			<del></del>		
		<del> </del>		<u> </u>		<del></del>		
V. TEST DATA AND REQUES		Test must be a able for this de	pin or be jor	JMI 24 Nows)			qual to or exce	ed top all
V. TEST DATA AND REQUES	T FOR ALLOWABLE	Test must be a able for this de	pin or be jor	of total volum full 24 hours) Mathod (Flow,			qual to or exce	ed top all
V. TEST DATA AND REQUES OIL WELL Date First New Cit Run To Tanks		(Test must be a able for this d	pin or be jor	Method (Flow,			qual to or exce	ed top all
V. TEST DATA AND REQUES OIL WELL Date First New Oil Run To Tanks Length of Test	Date of Test	(Test must be a able for this de	Producing h	Juli 24 hours) Mathod (Flow,		ift, etc.;	qual to or exce	ed top all
V. TEST DATA AND REQUES OIL WELL Date First New Oil Run To Tanks Length of Teet Actual Prod. During Teet	Date of Test Tubing Pressure	(Test must be a able for this di	Producing A	Juli 24 hours) Mathod (Flow,		Choke Size	qual to or exce	ed top all
V. TEST DATA AND REQUES	Tubing Pressure Oil-Shis.	(Test must be a able for this d	Producing A  Casing Pres  Water - Bbis	Juli 24 hours) Mathod (Flow,	pump, gas l	Choke Size		ed top all