

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

Form C-104  
Revised 10-01-78  
Format 06-01-83  
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U.S.S.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PERATION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator  
Cenergy Exploration Company

Address  
10210 N. Central Exwpy., Suite 500 Dallas, Texas 75231

Reason(s) for filing (Check proper box) Other (Please explain)

New Well  Change in Transporter of:  
 Recompletion  Oil  Dry Gas  
 Change in Ownership  Casinghead Gas  Condensate

If change of ownership give name and address of previous owner W. B. Martin & Associates, Inc. 2110 N. Sullivan Farmington, NM 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name Martin-Florance	Well No. 9	Pool Name, including Formation S. Lindrith Gallup - Dakota	Kind of Lease State, Federal or Fee	Jicarilla Apache	Lease No. 362
Location Unit Letter <u>I</u> ; <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>East</u> Line of Section <u>5 NESE</u> Township <u>23 North</u> Range <u>4 West</u> , NMPM, <u>Rio Arriba</u> 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 checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <del>El Paso Natural Gas</del>	Address (Give address to which approved copy of this form is to be sent) P. O. Box <del>1111</del> <del>El Paso, Texas 79901</del>				
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 5	Twp. 23N	Rge. 4W	Is gas actually connected? When No 60 days

If this production is commingled with that from any other lease or pool, give commingling order number: S. Lindrith Gallup - Dakota

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.

Frank T. Chavez  
(Signature)  
Production & Regulatory Analyst  
(Title)  
12/30/83  
(Date)

OIL CONSERVATION DIVISION  
JAN 03 1984  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Original Signed by FRANK T. CHAVEZ  
TITLE SUPERVISOR DISTRICT # 3

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.