

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

1. DISTRIBUTION		
2. STATE		
3. COUNTY		
4. DISTRICT		
5. TOWNSHIP		
6. RANGE		
7. SECTION		
8. WELL NO.		
9. POOL NAME		
10. KIND OF LEASE		
11. STATE, FEDERAL OR FEE		
12. LEASE NO.		
13. UNIT LETTER		
14. FEET FROM THE		
15. LINE AND		
16. FEET FROM THE		
17. LINE OF SECTION		
18. TOWNSHIP		
19. RANGE		
20. SECTION		
21. UNIT LETTER		
22. FEET FROM THE		
23. LINE AND		
24. FEET FROM THE		
25. LINE OF SECTION		
26. TOWNSHIP		
27. RANGE		
28. SECTION		
29. UNIT LETTER		
30. FEET FROM THE		
31. LINE AND		
32. FEET FROM THE		
33. LINE OF SECTION		
34. TOWNSHIP		
35. RANGE		
36. SECTION		
37. UNIT LETTER		
38. FEET FROM THE		
39. LINE AND		
40. FEET FROM THE		
41. LINE OF SECTION		
42. TOWNSHIP		
43. RANGE		
44. SECTION		
45. UNIT LETTER		
46. FEET FROM THE		
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48. FEET FROM THE		
49. LINE OF SECTION		
50. TOWNSHIP		
51. RANGE		
52. SECTION		
53. UNIT LETTER		
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56. FEET FROM THE		
57. LINE OF SECTION		
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76. SECTION		
77. UNIT LETTER		
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81. LINE OF SECTION		
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83. RANGE		
84. SECTION		
85. UNIT LETTER		
86. FEET FROM THE		
87. LINE AND		
88. FEET FROM THE		
89. LINE OF SECTION		
90. TOWNSHIP		
91. RANGE		
92. SECTION		
93. UNIT LETTER		
94. FEET FROM THE		
95. LINE AND		
96. FEET FROM THE		
97. LINE OF SECTION		
98. TOWNSHIP		
99. RANGE		
100. SECTION		

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
AUG 21 1985
OIL CON. DIV.
DIST. 3

JACK A. COLE

P. O. BOX 191, FARMINGTON, NEW MEXICO 87499

Reason(s) for filing (Check proper box)

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

Other (Please explain)

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name MARCUS	Well No. 1	Pool Name, Including Formation COUNSELOR GALLUP-DAKOTA	Kind of Lease FEDERAL State, Federal or Fee	Lease No. SF-078362
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Location
Unit Letter A : 800' Feet From The NORTH Line and 960' Feet From The EAST
Line of Section 7 Township 23N Range 6W , NMPM, RIO ARRIBA County

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐ Address (Give address to which approved copy of this form is to be sent)

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Address (Give address to which approved copy of this form is to be sent)
GAS COMPANY OF NEW MEXICO P.O. Box 1899, Bloomfield, New Mexico 87413

If well produces oil or liquids, give location of tanks.	Unit A	Sec. 7	Twp. 23N	Rge. 6W	Is gas actually connected? YES	When AUGUST 15, 1985
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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.

Dewayne Blancett DEWAYNE BLANCETT
(Signature)
PRODUCTION SUPERINTENDENT
(Title)
AUGUST 19, 1985
(Date)

OIL CONSERVATION DIVISION
AUG 21 1985

APPROVED _____
Original Signed by CHARLES GHOLSON
BY _____
TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #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 deviated 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 conditions.
Separate Forms C-104 must be filed for each pool in multiple completed wells.