

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF TONS OF OIL	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.E.S.	
LAND OFFICE	
TRANSPORTER	OIL
OPERATOR	NAT
PRODUCTION 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  
**APACHE CORPORATION**

Address  
**1700 Lincoln, Ste. 1900, Denver, CO 80203-4519**

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Condensate Gas	<input type="checkbox"/> Condensate

EFFECTIVE OCTOBER 1, 1990

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Apache</b>	Well No. <b>107</b>	Pool Name, including Formation <b>W. Lindrith Gallup Dak.</b>	Kind of Lease State, Federal or Fee <b>Federal</b>	Lease No. <b>126</b>
Location				
Unit Letter <b>J</b>	<b>1970</b> Feet From The <b>South</b> Line and <b>1780</b> Feet From The <b>East</b>			
Line of Section <b>2</b>	Township <b>24N</b>	Range <b>4W</b>	NMPL, <b>Rio Arriba</b>	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"/> <b>Giant Refining Company</b>	Address (Give address to which approved copy of this form is to be sent) <b>23735 North Scottsdale Road Scottsdale, AZ 85255</b>
Name of Authorized Transporter of Condensate Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <b>El Paso Natural Gas</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 1492 El Paso, TX 79978</b>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rec.
	Is gas actually connected? 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.

  
**David M. Talbot** (Signature)  
**Sr. Operations Engineer**  
(Title)  
**September 6, 1990**  
(Date)

OIL CONSERVATION DIVISION

APPROVED **OCT 01 1990**, 19 \_\_\_\_\_

BY 

TITLE **SUPERVISOR DISTRICT 42**

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.