STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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BANTA FE		Ī	
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U.A.G.A.			
LAMO OFFICE			
TRAMSPORTER	916		
	144		
OPERATOR			
PROBATION OFFICE			

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

Form C-104 Revised 10-01-78

OPERATOR	KEY		TO ALL DAVE	LE		
PRODUCTION OFFICE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS					
APACHE CORPORATIO)N					<u>.</u>
Address						
1700 Lincoln, Ste		r, CO	80203-4	519)
Reason(s) for filing (Check proper bea)			Oth	ver (Please e	spicus)	
New Well	Change in Transporter			2 12 12 12 <i>(20</i> 11 T	UU OOMODED 1 1	
Change in Comprehie	Connectoral Con		Gen	SFFECTI	VE OCTOBER 1, 1	1990
If change of ownership give name and address of previous owner		· · · · · · · · · · · · · · · · · · ·				
II. DESCRIPTION OF WELL AND) LEASE					
Lesso Name	Well No. Peol Neno,	-		1 '	ind of Louse	Lease No.
Apache	131 W. Lin	arith	Gallup	Dak. s	as. Federa or Feo Feder	al 127
	60 North		198	80	west	
Unit Letter:	Feet Fred That	صفلياً			Feet Free The West	
Line of Section 4 Town	nehip 24N	Range	4W	, NMPM,	Rio Arriba	County
III DESIGNATION OF TRANSP	OPER OF OF AND N					
Mane of Authorized Transporter of Oll	ORIER OF OIL AND N			aadeese sa v	high appeared come of this form	1000
Giant Refining Com		•	23733 N	lorth S	cottsale Road Z 85255	· La to de Jenty
Name of Authorized Transporter of Cast			Address (Give	eddress to u	mich approved copy of this form	•
El Paso Natural Ga				ox 149		79978
If well preduces oil or liquids, give location of tents.	Unit Sec. Top.	Ree.	le des estnett.	y cannected?	when	•••
If this production is comminged with	a that from any other lease	e or pool, g	ive commungi	ling order nu	imber:	
NOTE: Complete Parts IV and V	on reverse side if necess	ury.				
VI CERCIEC ACT OF COMMIAN		Ī			ISERVATION DIVISION	
VI. CERTIFICATE OF COMPILANCE						
I hereby certify that the rules and regulation		- 11	APPROVE		OCT 0 1 1990	
been compiled with and that the informance my knowledge and belief.	a given in care and comblete to	the best of	5			·
,		- 1	JY	7	100/1	
	114	1	TITLE		Jer. Sham	
Sh Dm H	//_ //		This fo	SUP) arm is to be	RYSOR DISTRICT N	DDE 1104.
David M. Talbot Signer	UMI		If this			
Sr. Operations Engi			tests taken	orn much be on the well	secompanied by a tabulation is secondance with AULE	m of the deviation
(Title			All sec	tions of thi	s form must be filled out con nicted wells.	mplotoly for silow-
September 6, 1990			Fitt ev	t call lest	leas L. II. III. and VI for a	thanges of owner,
(Dete	,				transporten or other such ch 104 must be flied for each	
		H	completed a	relia.	or 11400 tot 98C	has n wantibly