## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

| DISTRIBUTION     |     |  |  |
|------------------|-----|--|--|
| PANTAFE          |     |  |  |
| FILE             |     |  |  |
| U.B.O.A.         |     |  |  |
| LAND OFFICE      |     |  |  |
| THANSPORTER      | OIL |  |  |
|                  | BAD |  |  |
| OPERATO4         |     |  |  |
| PROBATION OFFICE |     |  |  |

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

Form C-194 Revised 10.01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiply

## REQUEST FOR ALLOWABLE

| PROBATION OFFICE AUTHORIZATION TO TRAN   | AND ISPORT OIL AND NATURAL GAS  |  |  |
|--|---|--|--|
| Crestion  Ordinate Oil 5 Con Company bing  |   |  |  |
| Merrien Oil & Gas Corporation  |   |  |  |
| P. C. Box 840, Farmington, New Mexico 874  | 99  |  |  |
| Revson(s) for filing (Check proper box)  | Other (Please expen)  |  |  |
| New Well Change in Transporter of:   | MAY 2 1 1985  |  |  |
| Recompletion & Oil   | y Gas WIM 2 1   |  |  |
| Change in Ownership Casinghead Gas   | Condensate OIL CON DIV.   |  |  |
| Hichenge of ownership give name and address of previous owner  |   |  |  |
| II. DESCRIPTION OF WELL AND LEASE  |   |  |  |
| Lease Name   Well No. Fool Name, Including   |   |  |  |
| Canyon Largo Unit 303 Devils Fork  | Gallup State, Federal or Fee Federal SF 078874  |  |  |
| 1,ocation  | *   |  |  |
| Unit Letter O : 790 Feet From The South  | ine and 1850 Feet From The East   |  |  |
| Line of Section 5 Township 24N Range   | 6W , NMPM, Rio Arriba County  |  |  |
| HI. DESIGNATION OF TRANSPORTER OF OIL AND NATUR  | AL GAS  |  |  |
| Name of Authorized Transporter of Cil [X]   or Condensate  |   |  |  |
|  | P. O. Box 1320, Farmington, New Mexico 87499  |  |  |
| The Mancos Corporation  P. U. Box 132U, Farmington, New Mexico 87499  Hame of Authorized Transporter of Casinghead Gas (X) or Dry Gas   Address (Give address to which approved copy of this form is to be cent) |   |  |  |
| El Paso Natural Gas Co.  | P. O. Box 4289, Farmington, New Mexico 87499  |  |  |
| If well produces oil or liquids, Unit , Sec. Twp. Rgs.   | is gas actually connected? When   |  |  |
| give location of tanks. O 15 24N 6   | W Yes 7/81  |  |  |
| If this production is commingled with that from any other lease or poo   | d, give commingling order number:   |  |  |
| NOTE: Complete Parts IV and V on reverse side if necessary.  |   |  |  |
| OH CONSERVATION DIVISION   |   |  |  |
| MAY 21 1985  |   |  |  |
| Thereby certify that the rules and regulations of deficill Conservation Division have APPROVED   |   |  |  |
| been complied with and that the information given is true and complete to the best of my knowledge and belief.   |   |  |  |
| SUPERVISOR DISTRICT # 3  |   |  |  |
| TITLE  |   |  |  |
| This form is to be filed in compliance with  |   |  |  |
| If this is a request for allowable for a newly drilled or de "(Signature)" well, this form must be accompanied by a tabulation of the de   |   |  |  |
| Steve S. Dunn, Operations Manager  | well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 111.               |  |  |
| (Title)  All sections of this form must be filled out completely able on new and recompleted wells.  |   |  |  |
| 5/31/85 (Date)   | Fill out only Sections I, II, III, and VI for charges of owner, well name or number, or transporter, or other such change of condition. |  |  |

completed wells.