

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.A.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

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

**RECEIVED**

Form C-104  
Revised 10-01-78  
Format 08-01-83

JUL 21 1987

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
OIL CON. DIV  
DIST. 3

I.

Operator William R. Earnhardt 911-309-3873

Address P. O. Box 1114, Bristow, Oklahoma 74010

Reason(s) for filing (Check proper box)

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

If change of ownership give name and address of previous owner Jerome P. McHugh, P. O. Box 208, Farmington, New Mexico 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Puppa Manche</u>	Well No. <u>5</u>	Pool Name, including Formation <u>South Blanco Picture Cliffs</u>	Kind of Lease <u>State, Federal or Fee</u>	Lease No. <u>Fee</u>
Location				
Unit Letter <u>B</u> : <u>790</u> Feet From The <u>North</u> Line and <u>1850</u> Feet From The <u>East</u>				
Line of Section <u>35</u> Township <u>24 North</u> Range <u>1 West</u> , NMPM, <u>Rio Arriba</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Castinhead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
<u>El Paso Natural Gas Company</u>	<u>P. O. Box 1492, El Paso, Texas 79978</u>			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
Is gas actually connected?		When		
<u>Yes</u>		<u>1981</u>		

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.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 21 1987  
BY Frank J. Davy  
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.