

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

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JUN - 8 1987
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator SUN EXPLORATION AND PRODUCTION COMPANY	
Address P.O. BOX 5940 T.A. Denver, Colorado 80217	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Change in Ownership	Change in Transporter of: <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate Effective 4-1-87

If change of ownership give name and address of previous owner **Jerome P. McHugh, 650 S. Cherry Street, Suite 1225, Denver Co 80222**

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mother Lode	Well No. 1	Pool Name, including Formation Gavilan Mancos	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter H ; 1730 Feet From The North Line and 860 Feet From The East Line of Section 3 Township 24N Range 2W , NMPM, Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS


Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipeline Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1887 Bloomfield, NM
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Sun Exploration and Production Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 5940 T.A. Denver, Co 80217
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? Yes When 3-20-84

If this production is commingled with that from any other lease or pool, give commingling order number: **R-7365**

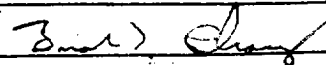
NOTE: Complete Parts IV and V on reverse side if necessary.

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)
PRORATION AND PRODUCTION ACCTG SUPVR
(Title)
6-2-87
(Date)

OIL CONSERVATION DIVISION
JUN - 8 1987

APPROVED _____, 19____
BY 
TITLE **SUPERVISION 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 deepen 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 all able on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of own well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multiple completed wells.

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<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

☒ Dry Gas
☐ Condensate

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Proration and Production Acctg. Supvr

(Title)

6-2-87

(Date)

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