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STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

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

RECEIVED
JUN 05 1986
OIL CON. DIV
DIST. 3

I. Operator
Jerome P. McHugh

Address
P O Box 809, Farmington, NM 87499

Reason(s) for filing (Check proper box)

| | | |
|--|--|-------------------------------------|
| <input type="checkbox"/> New Well | Change in Transporter of: | <input type="checkbox"/> Dry Gas |
| <input type="checkbox"/> Recompletion | <input type="checkbox"/> Oil | <input type="checkbox"/> Condensate |
| <input type="checkbox"/> Change in Ownership | <input checked="" type="checkbox"/> Casinghead Gas | |

Other (Please explain)
**First Delivery of Gas on an Oil Well

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|---|----------------------|
| Lease Name Full Sail | Well No. 2 | Pool Name, Including Formation Gavilan Mancos | Kind of Lease State, Federal or Fee Fed. | Lease No. NM23039 |
| Location Unit Letter I : 1650 Feet From The South Line and 790 Feet From The East Line of Section 28 Township 25N Range 2W , NMPM, Rio Arriba County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

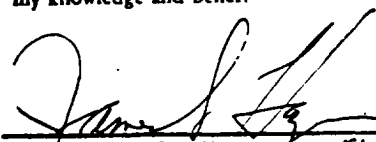
| | | | | | | |
|---|--|------------|-------------|------------|-----------------------------------|------------------|
| Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Ciniza Pipe Line Inc. (no change) | Address (Give address to which approved copy of this form is to be sent) P O Box 1887, Bloomfield, NM 87413 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Jerome P. McHugh | Address (Give address to which approved copy of this form is to be sent) P O Box 809, Farmington, NM 87499 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit I | Sec. 28 | Twp. 25N | Rge. 2W | Is gas actually connected? Yes | When **6-2-86 |

If this production is commingled with that from any other lease or pool, give commingling order number _____

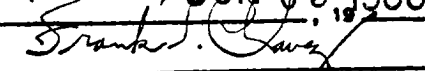
NOTE: Complete Parts IV and V on reverse side if necessary.

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.


James S. Hazen (Signature)
Field Supt. (Title)
6/3/86 (Date)

OIL CONSERVATION DIVISION

APPROVED  JUN 05 1986
BY _____
SUPERVISOR DISTRICT # 3

TITLE _____

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.