

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

Form C-104
Revised 10-01-78
Format 08-01-83
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SANTA FE	
FILE	
U.S.S.A.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

R E C O R D
OCT 1 1990

Operator	APACHE CORPORATION		OIL CON. DIV. DIST. 3
Address	1700 Lincoln, Ste. 1900, Denver, CO 80203-4519		
Reason(s) for filing (Check proper box)	Change in Transporter of:	Other (Please explain)	EFFECTIVE OCTOBER 1, 1990
<input type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	<input checked="" type="checkbox"/> Oil <input type="checkbox"/> Condensate Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate		

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Apache	147	W. Lindrith Gallup Dak	State, Federal or Fee Federal	129
Location	Unit Letter <u>G</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>East</u> Line of Section <u>13</u> Township <u>24N</u> Range <u>4W</u> , NMPM, <u>Rio Arriba</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)				
Giant Refining Company	23733 North Scottsdale Road Scottsdale, AZ 85255				
Name of Authorized Transporter of Condensate Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas	P.O. Box 1492 El Paso, TX 79978				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Trp.	Reg.	Is gas actually connected? When

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.

David M. Talbot
David M. Talbot (Signature)
Sr. Operations Engineer
(Title)
September 6, 1990
(Date)

OIL CONSERVATION DIVISION
OCT 01 1990
APPROVED _____, 19____
BY Eric J. Sherry
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.