

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTOIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-01-78
Formal CE-01-63
Page 1REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**RECEIVED**

OCT 31 1984

OIL CON. DIV.
DIST. 3

Dugan Production Corp.

P.O. Box 208, Farmington, NM 87499

Reason(s) for filing (Check proper box)

- ☐ New Well
☐ Re-completion
☐ Change in Ownership

Change in Transporter of:

- ☒ Oil
☐ Condensed Gas
☐ Dry Gas
☐ Condensate

Other (Please explain)

Change of transporter
Effective Nov. 1, 1984If change of ownership give name
and address of previous owner

III. DESCRIPTION OF WELL AND LEASE

Lease Name April Surprise	Well No. 4	Pool Name, including Formation Bisti Lower Gallup	Kind of Lease State, Federal or Free Federal	Lease No. NM 4958
Location Unit Letter L : 1710 Feet From The South Line and 830 Feet From The West Line of Section 19 Township 24N Range 9W, NMPM, San Juan				

IV. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

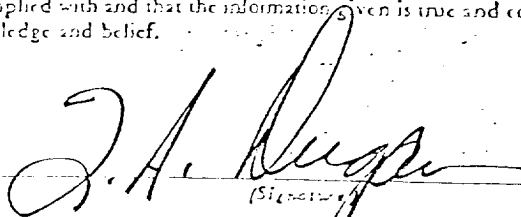
Name of Authorized Transporter of Oil ☒ or Condensate ☐ Giant Refining, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256 Farmington, NM 87401
Name of Authorized Transporter of Condensed Gas ☒ or Dry Gas ☐ Dugan Production Corp. (no change)	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit L Sec. 19 Twp. 24N Rge. 9W	Is gas actually connected? When

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

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

V. 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.



President

10-29-84

(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 31 1984, 19

BY Original Signed by FRANK T. CHAVEZ

TITLE SUPERVISOR DISTRICT

This form is to be filled in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the device tests taken on the well in accordance with RULE 1111.

All sections of this form must be filled out completely for all wells on new and re-completed 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 Form C-104 must be filled for each pool in multi-completed wells.