STATE OF NEW MEXICO

ERGY MINERALS DEPARTMENT

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AND OFFICE			
	OIL		
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PERATOR.			
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OIL CONSERVATION DIVISION P. O. BOX 2028 SANTA FE, NEW MEXICO 87501

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

purmet			
Union Texas Petroleum Corporation			
P. O. Box 1290, Farmington, New Mexico 87499			
sessin(s) for filling (Check proper box)	Other (Please explain)		
Note Well Change is Transporter et:			
루 : : : : : : : : : : : : : : : : : : :	y Gas		
Change In Owenship Casingheed Gas 🖟 Co			
theage of ownership give name			
1 address of previous owner			
DESCRIPTION OF WELL AND LEASE	••		
Well No. Pool-Name, Including Fe	rmotion Kind of Lease No.		
Jicarilla "J" 9 Basin Dakota	Stema, Federal or Fee Fed. Jic.Cont.153		
pertion	•		
Unit Latter B : 790 Foot From The North Line	1980 Feet From The East		
200	TII Dea Avieta		
Line of Section 26 Township 26N Rompe	5W - , Nurpu. Rio Arriba County		
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Authorized Transporter of Cil ar Condensate	Accesses (Give address to which approved copy of this form is to be sent)		
Gary Energy Corporation	P. O. Box 489, Bloomfield, N.M. 87413		
east of Authorized Transporter of Cosinghead Gas or Dry Gas [X]	Address (Give address to which approved copy of this form is to be sent)		
Gas Company of New Mexico	P. O. Box 26400, Albuquerque, N.M. 87125		
well preserve eil or liquida, Unit Sec. Twp. Ree.	Is you actually consected? When		
B 26 26N 5W	Yes		
this production is commingled with that from any other lease or pool,	give commingling order numbers		
OTE: Complete Parts IV and V on reverse side if necessary.	•		
. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
ereby certify that the rules and regulations of the Oil Conservation Division have			
en complied with and that the information given is true and complete to the best of			
knowledge and belief.	BY Sanks. Xave		
	SUPERVIOR DISTRICT # 3		
Senneth & Kosky			
Kenneth E. Roddy (Signature) Well, this form must be accompanied by a tabulation of the devi			
Area Production Superintendent			
(Title)	All sections of this form must be filled out completely for allow- able on new and recompleted wells.		
10/1/84	Fill out only Sections L. H. H. and VI for changes of owner,		
(Pain)	well name or number, or transporten or other such change of condition.		