## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

[	·	
DISTRIBUTION	OIL CONSERVA	TION DIVISION
SANTA FE		
FILE	P. O. BO	
U.8.0.8.	SANTA FE, NEW	MEXICO 87501
LAND OFFICE		
TRANSPORTER OIL	REQUEST FOR	ALLOWABLE
OPENATOR	<b>1A</b>	4D .
PROBATION OFFICE	<b>AUTHORIZATION TO TRANSP</b>	ORT OIL AND NATURA
I.		
Operator		
Southern Union Explo	ration Company	
Address		
P. O. Box 2179 Farmin	gton, NM 87499	•
Resson(s) for liling (Check proper box)		Other (Please et
New Well	Change in Transporter of:	
IEI ·	,	y Gas
Recompletion		ndensote
Change in Ownership		<del></del>
If change of ownership give name		•
and address of previous owner		
H. DESCRIPTION OF WELL AND L	EASI!	ormation K
Lease Name	Well No. Pool Name, Including Fo	
Jicarilla "A"	14 Wildhorse (	Gallup s
Location		
	North	1160
Unit Letter A : 1186	Feet From the	- 6.00
ton of Section 24 Townsh	In 26 Range	4 , ммрм,
Line of Section 24 Townsh	ip 20 (10114)	
	www.orout.thus.hts.till.At	CAS
III. DESIGNATION OF TRANSPOR	or Condensate [X]	Aidress (Give address to
Name of Authorized Transporter of OII	•	P. O. Box 159
Gary Energy Corporation	n ·	·
Hame of Authorized Transporter of Casingle	nead Gas 🗀 or Dry Gas 🔀	Address (Give address to
Gas Company of New Mex	ico	P. O. Box 1899
		is gas actually connected:
If well produces oil or liquide,	i i i	
give location of lanks.		
If this production is commingled with the	nat from any other lease or pool,	give commingling order n
NOTE: Complete Parts IV and V or		••
		. OIL CO
VI. CERTIFICATE OF COMPLIANC	Ŀ	
I hereby certify that the rules and regulations	of the Oil Conservation Division have	APPROVED
been complied with and that the information g	iven is true and complete to the best of	
my knowledge and belief.	real to the desire of the second	BY
•		E
Martin D. Boggs		TITLE SUPERVIS
	•	

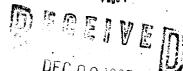
Drilling & Production Supt.

December 15, 1987

(Tille)

(Date)

Form C-104 Revised 10:01-78 Format 00-01-83 Page 1



R ALLOWABLE ND PORT OIL AND NATURAL GAS 🖖 🚜 🤫 🦠

1		1			WANTED TO I			
Operator				DIST 2				
Southern Union Ex	ploration	Company	7			··· •		
Address	proructon	company						
P. O. Box 2179 Fam	minaton. N	M 87499						
Ranson(s) for liling (Check proper box		07155	. 0	ther (Please	explain)			
New Well		Transporter of:						
Recompletion	Поп		Dry Gas		*			
Change in Ownership	Caetr	ighead Gan	Condensote					
Change in Grand								
If change of ownership give name			•					
and address of previous owner								
an announcement of switte ARI	11.12.400							
II. DESCRIPTION OF WELL AN	D LEASE	LASI: Well No. Pool Name, Including Formation			Kind of Lease		Contrac	
Lease Name					State, Federal or Fe	• Federal	Contrac 105	
Jicarilla "A"	14	Wildhorse	Garrab		<u> </u>			
Location		NT	•	1160		D		
Unit Letter A : 11	86 Feet Fro	m The NOTTH	ine and	1100	Feet From The	Last		
	•				Pio 7	rriba	County	
Line of Section 24 To	wn≢hip 2	6 Range	4	, NMPN	i, 110 F	ит поа	County	
				.£ .	•			
III. DESIGNATION OF TRANS	PORTER OF C	DIL AND NATUR	AL GAS		en which appeared cor	y of this form is	to be sent)	
Name of Authorized Transporter of OII or Condensate X			Vadiage (A)	P. O. Box 159 Bloomfield, MM 87413				
Gary Energy Corpora	tion		P. O. I	30X 159	to myicy abbioned cot	Net 0/413	to be sent!	
Hame of Authorized Transporter of Ca	singhead Gas [	or Dry Gas X	Address (Gi	ve address	to mureu abbianca cot			
Gas Company of New M	Mexico		P. O. E	30x 1899	Bloomfield	<sub>NM</sub> 874	<u> </u>	
	Unit Sec	Twp. Rge.	is gas actua				•	
If well produces oil or liquids, give location of tanks.	i .							
				alles ords	e numbers			
If this production is commingled wi	ith that from an	y other lease or poo	i, Eive commin	IRTHE OINC			<del></del>	
NOTE: Complete Parts IV and	V on reverse s	ide if necessary.	•				••	
NOIE: Complete lans it and			11				٠.	
VI. CERTIFICATE OF COMPLIA	NCE		•		CONSERVATION	DIVISION	•	
			i	:	)	•		
I hereby certify that the rules and regulati	ions of the Oil Co	onservation Division ha	APPROV	/ED			, 19	
been complied with and that the informati	ion given is true at	id complete to the best	01   50	-7		· . ·		
my knowledge and belief.			BT	20 1. 30				
Martin D. Boggs				CHOWRY	ISTON DISTRIC	T#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 deviations taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allcable 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 conditions.

Separate Forms C-104 must be filed for each pool in multi; completed wells.