## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION		
SANTA FE		
711 E		
U.8.0.4.		
LAND OFFICE		
THAMEPOHTER	OIL	
	BAS	
CPERATOR		
FROMATICIE OFFICE		

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

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

Separate Forms C-104 must be filled for each pool in multiply

## REQUEST FOR ALLOWABLE AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
Operator			
Morrion Oil & Gas Corporation			
P. O. Box §40 , Farmington, New Mexico 87499	o regived		
Recton(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:			
	MAY 2 1 1985		
Clympe in Ownership Cnainghead Gas Co	ondensate (SiV		
If change of ownership give name and address of previous owner	OIL COMMON		
II. DESCENTION OF WELL AND LEASE    Well No.   Feel Name, Including F	ormation   Kind of Lease   I again No.		
	p State, Federal or Fee Federal SF 078897A		
Unit Letter P 660 Feet From The South Line and 660 Feet From The East			
Line of Section 7 Township 26N Range	11W , HMPM, San Juan County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	Address (Give address to which approved copy of this form is to be sent)  P. O. Box 1320. Farmington. New Mexico. 87499  Address (Give address to which approved copy of this form is to be sent)  P. O. Box 4289. Farmington. New Mexico. 87499  Is gas actually connected?  When  Yes  4/74		
If this production is commingled with that from any other lesse or pool, give commingting order number:			
NOTE: Complete Parts IV and V on reverse side if necessary.			
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION		
II. ALOV ALTOOF			
I hereby on the 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	APPROVED 100		
my knowledge and belief.	BY		
1 /	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 deeper			
(Signature)  Storm S. Dunn, Operations Manager  well, this form must be accompanied by a tabulation of the deviation of the deviation of the deviation of the well in accordance with MULE 117.			
(Title)	All sections of this form must be filled out completely for allowable on new and recompleted wells.		
(Date)	Fill out only Sections I, II, III, and VI for cheiges of owner, well name or number, or transporter, or other such change of condition.		

completed walls.