STATE OF NEW MEXICO ENERGY MO MINERALS DEPARTMENT

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DISTRIBUTION		1
BANTA PE		Γ
FILE	·	\Box
U.S.G.A.		
LAND OFFICE		
TRANSPORTER OIL		
d A&		
OPERATOR		
PROBATION 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 filed for each pool in multiply

REQUEST FOR ALLOWABLE

PROBATION OFFICE				AND			
I.	AUTHOR	RIZATION	TO TRANS	SPORT OIL AND N	NATURAL GAS		
Operator							
DUGAN PRODUCTION C	ORP.						
Address	<u> </u>		<u> </u>	······································			
P.O. Box 5820, Farming	ton N	М 87490	n-5820				
Resson(s) for liling (Check proper box) Other (Please explain)					Please explaini		
New Well	Change in Transporter of:						
Recompletion	011			Change in Ownership effective 12-1-88.			
X Change in Ownership	Cast	inghead Gas		Condensate	igo in o inici sinp circo		
If change of ownership give name Mo	bil Pro	ducing	TX & NI	M Inc., 9 Gre	eenway Plaza, Suite 27	700, Houston, Texas 77046	
II. DESCRIPTION OF WELL AND L	EASE						
Lease Name	Well No.	1	, including i		Kind of Lease	Lease No.	
Starr	1 1	Ballard	Pictur	ed Cliffs	State, Federal or Fee Fed	eral SF-078384	
Unit Letter P : 1190	_ Feet Fro	m The So	uth Li	ne and 1120	Feet From The Eas	t	
Line of Section 6 Townshi	P	26N	Range	8W , i	NMPM, San Juan	County	
III. DESIGNATION OF TRANSPOR Name of Authorized Transporter of OII NONE		OIL AND andensate [dress to which approved copy of this	s form is to be sent)	
Name of Authorized Transporter of Castinghead Gas or Dry Gas KX Gas Company of New Mexico			P.O. Box 26400, Albuquerque, NM 87125				
If well produces oil or liquids, que location of tanks.	t Sec.	. Twp.	Rge.	Is gas actually co Yes			
If this production is commingled with the	at from an	y other les	se or pool,	give commingling	order number:		
NOTE: Complete Parts IV and V on		•	•	- •			
VI. CERTIFICATE OF COMPLIANCE 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		APPROVED_	IL CONSERVATION DIVIS	19,1988			
ny knowledge and belief.		o complete to	o die best of	BY		the state of the s	
				TITLE	SUPERCASOR DISTA	राठा 🎓 🕽	
RID				This form	is to be filed in compliance wi	th RULE 1104.	
Bud Crane (Signature) Production Superintenden	.+			well, this form	request for allowable for a new must be accompanied by a tabu the well in accordance with A	ilation of the deviation	
12-14-88 (Tule)			All sections of this form must be filled out completely for allow sble on new and recompleted wells.				
(Date)			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.				

completed wells.