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LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRODUCTION OFFICE			

Form C-104
Revised 10-01-78
Format 06-01-83
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I.

If change of ownership give name and address of previous owner El Paso Natural Gas Company, P. O. Box 4289, Farmington, NM 87499

Lessee Name Hancock A	Well No. 8	Pool Name, including Formation <i>Chaco</i> Harris Mesa Chacra Ext.	Kind of Lease State, Federal or Fee	Lease No. NM 04209
Location				
Unit Letter <u>P</u> ; <u>1150</u> Feet From The <u>South</u> Line and <u>1150</u> Feet From The <u>East</u>				
Line of Section <u>26</u> Township <u>28N</u> Range <u>9W</u> , NMPM, San Juan County				

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
Meridian Oil Inc.					P. O. Box 4289, Farmington, NM 87499	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>					Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company					P. O. Box 4289, Farmington, NM 87499	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	P	26	28N	9W		

Reggie Cook
(Signature)
Drilling Clerk
(Title)
11-1-86
(Date)

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