STATE OF NEW MEXICO ENERGY WO MINERALS DEPARTMENT

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DISTRIBUTION									
SAMPA FE									
FILE									
V.S.a.s.									
LANG OFFICE									
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OPERATOR									
PROMATION OFFICE									
	OIL • A4	OIL GAS							

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

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POTATOR			\Box					AND	ADCC		-		
PROMATION OFF	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS												
Operator													
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P.O. Box					, INIVI	87499-5	820		T =				
Resson(s) for filing (Check proper box) New Well Change in Transporter of								Other (Please explain)					
=	New Vell Change in Transporter of:							Creation of Basin-Fruitland Coal Gas Pool					
Change in O		hio			\equiv	nghead Gas	=	Dry Gas Per NMOCD Order No. R-8768 Condensate Effective 11-1-88					
							<u> </u>	Condensate	Effecti	ve 11-1-88			
Change of own									FR	· cic FR. /p	(7		
<u> </u>										.)			
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Pet Inc.					5	Basin-	ruitian	d Coal (ngs	State, Federal or Fee	avajo 14	- \$0-603-	
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Unit Letter	<u> </u>		_:_	790	_Feet From	n The N	orth L	ne and	790	Feet From The Eas	<u>st</u>		
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I. DESIGNAT	ΠΟΝ	OF	TR	ANSPORT									
Came of Authoriz	ed Ire	mapo	orter	et OII []	or Co	indensate (_	Address (Give address	to which approved copy o	f this form is	to be sent)	
lame of Authoriz	ed Tra	napo	rter	of Castnahed	ad Gas	or Dry	Gas 🔼	Address (Give address	to which approved copy of	f this form is	to be sentj	
Dugan Prod	ucti	on	Cor	m.				P.O. 1	Box 5820	, Farmington, NI	M 87499-	-5820	
well produces o				Unit	Sec.	Twp.	Rge.	ls gas act	ually connect	ed? When			
ive location of to				1 .	1	į	•	Yes		! 8-29-73			
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. CERTIFICATE OF COMPLIANCE							11	OIL C					
ereby certify that the rules and regulations of the Oil Conservation Division have					APPRO	VED	DEC 09 1	988	19				
in complied with and that the information given is true and complete to the best of knowledge and belief.					-		7						
Knowledge mg o	ener.							BY		Dury College			
			$\overline{}$				1	TITLE.		SUPERVISION DIS	TRICT#:	3	
/ 	1		. }	/4 ml				Thi	s form is to	be filed in compliance	with AULE	1104.	
im L. Jacobs / (Signature)							If this is a request for allowable for a newly drilled or despended						
Geologist		,		-1/1001 = 4/						be accompanied by a swell in accordance with			
1-30-88 (Title)								All sections of this form must be filled out completely for silomable on new and recompleted wells.					
 				(Date)						ections I. II. III, and, or transporter, or other			

completed wells.