

## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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DISTRIBUTION			
SANTA PE			1
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U.4.0.8,		1	
LAND OFFICE			
TRANSPORTER	OIL		
	DAS		
OPERATOR			
PRORATION OFFICE			

## OIL CONSERVATION DIVISION P. O. 80X 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-76 Format 06-01-83 Page 1

OR CORDINA

2 16

REQUEST FOR ALLOWABLE					
AND					
AUTHORIZATION TO TRANSPORT OIL AND NATURAL	GAS				

THOMATION OFFICE	AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS			
[.				
Operator				
Hicks Oil & Gas, Inc.				
Address				
P.O. Drawer 3307, Farmi	ington, NM 87499			
Reason(s) for filing (Check proper box)		Other (Please explain)		
New Well	Change in Transporter of:	•		
- Recompletion	∑ OII □ Dr	Effective 10-01-89		
Change in Ownership	Castaghead Gas Ca	Condensate		
f change of ownership give name and address of previous owner				
I. DESCRIPTION OF WELL AND LE	EASE			
Lease Name	Well No. Pool Name, Including F			
Southeast Cha Cha 🕖	39   Cha Cha Gallu	up Signe, Federal or Fee Federal SF-078-71		
Location				
Unit Letter 0 750	Feet From The South	ne and 1650 Feet From The East		
Line of Section 7 Township	p 28N Range	13W , NMPM, San Juan County		
Meridian Oil Trailing In Name of Authorized Transporter of Casingha If well produces oil or liquids, Unit	ead Gas or Dry Gas t	P.O. Box 4289, Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)  In gas actually connected?  When		
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I this production is commingled with the NOTE: Complete Parts IV and V on	reverse side if necessary.	OIL CONSERVATION DIVISION		
I. CERTIFICATE OF COMPLIANCE		SEP 2 9 1989		
hereby certify that the rules and tegulations of the Oil Conservation Division have een complied with and that the information given is true and complete to the best of		APPROVED SET AU 1000		
		Original Signed by FRANK T. CHAVEZ		
ny knowledge and belief.		SOUTH TO BE SOUTH		
1 1		TITLE		
		This form is to be filed in compliance with RULE 1104.		
Jim Hicks (Signeture)		If this is a request for silowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.		
President		All sections of this form must be filled out completely for allowable on new and recompleted wells.		
(Date) well name or number, or transporter, or other such char		Fill out only Sections I, II, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  Separate Forms C-104 must be filed for each pool in multiply completed wells.		