

5-UCD, Aztec, NM  
1-SWP  
1-STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED  
JUN 22 1987  
OIL CON. DIV.  
DIST. 2

I. Operator  
SOUTHWEST PRODUCTION COMPANY

Address  
PO Box 400, Aztec, NM 87410

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input checked="" type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)  
Name change by transporter.

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Zachry Fed.	Well No. 1	Pool Name, including Formation Basin Dakota	Kind of Lease State, Federal or Fee Fed. SF	Lease No. -C80724A
Location Unit Letter L : 1850 Feet From The S Line and 890 Feet From The W Line of Section 34 Township 29N Range 10W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

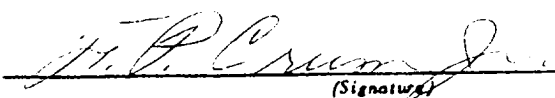
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Gary Energy Corp.	Address (Give address to which approved copy of this form is to be sent) PO Box 159, Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Sunterra Gas Gathering Company	Address (Give address to which approved copy of this form is to be sent) PO Box 1899, Bloomfield, NM 87413					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 34	Twp. 29N	Rge. 10W	Is gas actually connected? Yes	When

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

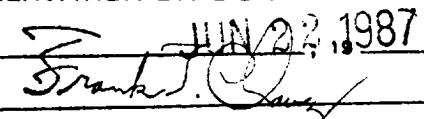
NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I 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 my knowledge and belief.

  
(Signature)  
Prod. Mgr.  
(Title)  
6-22-87  
(Date)

OIL CONSERVATION DIVISION

APPROVED   
BY \_\_\_\_\_  
TITLE \_\_\_\_\_ SUPERVISOR DISTRICT # 2

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable 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.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

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.

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